FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	205/19
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TATEMENT	OF CHAN	GES IN BE	ENEFICIAL	OWNERSHIP

1	OMB APPRO	JVAL				
	OMB Number:	3235-0287				
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* PATRICK STEPHEN C						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								neck all applic	cable)	Person(s) to Issue 10% Own Other (spe		ner	
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 08/25/2003								X Officer (give title Officer Specify below) Chief Financial Officer					
(Street) NEW YORK NY 10022					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person													
(City)	(Si		(Zip)																
		Tab	le I - N	on-Deri	vativ	e Sec	curit	ties Ac	quired	d, Di	sposed o	f, or Be	neficia	Ily Owned	l				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea		Execu Year) if any		Deemed cution Date, ny nth/Day/Year)		ction Instr.		s Acquired (A) or Of (D) (Instr. 3, 4 an		Benefic Owned	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct C Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)	
Common	Stock			08/25	/2003	003			M ⁽¹⁾		5,186	A	\$49.31	25 169	9,434		D		
Common	Stock 08/25			/2003	2003			F ⁽²⁾		126	D	\$53.2	3 169	9,308		D			
Common	Stock			08/25	/2003				F ⁽³⁾		4,805	D	\$53.2	3 164	164,503 ⁽⁴⁾		D		
Common Stock												2,	2,707		I i	Sy ssuer's 401(k) blan rustee			
		-	Table II								posed of, convertil			y Owned					
1. Title of Derivative Security (Instr. 3)	title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, urity or Exercise (Month/Day/Year) if any		4. Transa	I. 5. f Fransaction Of Ode (Instr. Se 3) Se(A) Dis of (Instr. Se(A) (A) Dis		5. Number 6. Exp		6. Date Exercisable and Expiration Date (Month/Day/Year)			nd of s ng e Security nd 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to	\$49.3125	08/25/2003			M ⁽¹⁾			5,186	01/27/20	00 ⁽⁵⁾	09/01/2003	Common Stock	5,186	\$0	0		D		

Explanation of Responses:

- 1. Exercise of stock options awarded under the issuer's employee stock option plan.
- 2. Payment of tax liability by delivering or withholding shares of stock incident to the exercise of the option under the issuer's employee stock option plan.
- 3. Payment of exercise price of stock option by delivering or withholding shares of stock incident to the exercise of the option under the issuer's employee stock option plan.
- 4. As a result of the reported transactions, the reporting person's Common Stock ownership has increased by 255 shares.
- 5. Option became exercisable six months from grant date.

Remarks:

Nina D Gillman by power of attorney

08/26/2003

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.