FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

VVd3/iii/gt6/1, D.O. 200-70

OMB AF	PR	OVAL
OMB Number:		3235-028
II =		

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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* Paik Elaine C. (Last) (First) (Middle) C/O COLGATE PALMOLIVE COMPANY 300 PARK AVENUE					2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] 3. Date of Earliest Transaction (Month/Day/Year) 03/08/2012 4. If Amendment, Date of Original Filed (Month/Day/Year)									(CI	S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) V. P. & Corporate Treasurer 6. Individual or Joint/Group Filing (Check Applicable)				
(Street) NEW YO (City)			10022 Zip)												Forn)			
		Tabl	e I - Non-	-Deriva	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D		Execution Date,		Code	Transaction Disposed Code (Instr. 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			ount of ties cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership						
								Code	v	Amount (A) or (D)			Price		action(s) 3 and 4)		(Instr. 4)		
Common Stock 03/0			03/08	3/2012		G ⁽¹⁾		1,039	,039 A		\$0		5,803	D					
Common Stock															97	I	By Spouse		
Common Stock														4	4,679	I	By Issuer's 401(k) Plan Trustee		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, Transa ity or Exercise (Month/Day/Year) if any Code (I		ction of E			Expiratio	s. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code V		(A)	(D)	Date Exercisal		Expiration Date	Title	Numl of Share						

Explanation of Responses:

 $1. \ Restricted \ stock \ award \ granted \ under \ the \ issuer's \ Executive \ Incentive \ Compensation \ Plan.$

Remarks:

Nina Huffman by power of attorney 03/12/2012

** Signature of Reporting Person Date

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

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.

^{*} 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).