FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| nstruction 1(h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* TERUEL JAVIER G | | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | ck all applic Directo | able) | 10% Ow | | ner | |
|---|---|--|--|-------|--------------------------------------|--|--|--------|---|-------------------|-----------------------------|---|---|--|---|---------------------|--|--|--|
| (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/29/2003 | | | | | | | | X Officer (give title Officer (specify below) below) Executive Vice President | | | | | |
| (Street) NEW YORK NY 10022 | | | | | _ 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Che-Line) X Form filed by One Reporting Form filed by More than One Person | | | | | | | | | | ting Person | | | |
| (City) | (S | | (Zip) | | | | | | | | | | | | | | | | |
| | | | ole I - No | | | _ | | | - | l, Di | sposed o | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/I | | | | | | ar) E | 2A. Deemed Execution Date, f any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Disposed O | | 5. Amount of Securities Beneficially Owned Following Reported | | Form: Direct | | . Nature of ndirect Seneficial Dwnership Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transaci (Instr. 3 | tion(s) | | | msu. 4) | |
| Common Stock 08/29/2 | | | | | 9/2003 | .003 | | | M ⁽¹⁾ | | 10,242 | A | \$54.281 | .3 275 | 275,973 | | D | | |
| Common Stock 08/29/2 | | | | | 9/2003 | 2003 | | | F ⁽²⁾ | | 69 | D | \$55.34 | 5 275 | 275,904 | | D | | |
| Common Stock 08/29/2 | | | | | 9/2003 | 2003 | | | F ⁽³⁾ | | 10,046 | D | \$55.34 | 5 265 | 265,858 | | D | | |
| Common Stock | | | | | | | | | | | | | | 8, | 362 | | I i | By ssuer's 101(k) blan | |
| | | | Table II | | | | | | | | oosed of, convertib | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Executior if any (Month/Da | Date, | 4. Transactio Code (Inst 8) | | | | 6. Date E Expiration (Month/I | on Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e (s i lly i | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | e V | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Stock Option (Right to | \$54.2813 | 08/29/2003 | | | M ⁽¹⁾ | | | 10,242 | 02/07/20 | 01 ⁽⁴⁾ | 09/01/2003 | Common Stock | 10,242 | \$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. Option became exercisable six months from the grant date.

Remarks:

Nina D. Gillman by power of

09/02/2003

<u>attorney</u>

** 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.