FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	ΙP
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OMB APPROVAL OMB Number: 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* <u>HUSTON JOHN J</u>						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								(Check all a Dir				Ssuer Owner (specify
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 09/08/2008								X Officer (give title Offier (specify below) Vice President				
(Street) NEW YORK NY 10022 (City) (State) (Zip)					4. If <i>F</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - No	on-Deriva	ative	Secu	ıritie	s Ac	quired	l, Dis	sposed o	f, or B	enefic	cially	Owne	ed		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution			Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			and 5) See Bei Ow		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)		(111501.4)
Common Stock 09/08/2					800				F ⁽¹⁾		318	D	\$7	9.25	3	33,468	D	
Common Stock 09/09/				09/09/2	008				S ⁽²⁾		95	D	\$79	.1369	3	3,373	D	
Common Stock															2,453	I	By Issuer's 401(k) Plan Trustee	
		Та	ıble II -								osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/	on Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Seci (Inst	vative (9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	,	(4)	(D)	Date	abla	Expiration	Title	or Number of					

Explanation of Responses:

- 1. Payment of tax liability by withholding shares of stock from award of restricted shares vesting under the issuer's stockholder-approved Executive Incentive Compensation Plan. The overall net effect of the vesting of restricted shares, after the withholding and sale of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Huston's non-restricted holdings (i.e., common shares held outright) of Colgate stock.
- 2. Sale of shares (with proceeds delivered to the Company) for payment of tax liability above minimum required statutory withholding (but not in excess of full applicable statutory tax rates) resulting from vesting of award of restricted shares under the Company's stockholder-approved Executive Incentive Compensation Plan. The overall net effect of the vesting of restricted shares, after the withholding and sale of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Huston's non-restricted holdings (i.e., shares held outright) of Colgate common stock.

Remarks:

Nina D. Gillman by power of <u>attorney</u>

09/10/2008

** 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.