COLGATE PALMOLIVE CO

Form 4

Common

Stock

November 29, 2006

	7, 2 000 N <i>1</i>							OMB AF	PPROVAL	
	ORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287		
Check the if no long subject to Section 1 Form 4 c	ger o STATEM 16.								January 31, 2005 verage rs per 0.5	
Form 5 obligatio may consisted for the second secon	stinue. Section 17(a	suant to Section a) of the Public 30(h) of the	Utility Hole	ding Cor	npan	y Act of	1935 or Section	1		
Print or Type l	Responses)									
	Address of Reporting F N DELIA H	Symbo	uer Name and I GATE PAL				5. Relationship of Issuer	Reporting Pers	on(s) to	
(Last)	(First) (M		of Earliest Ti			(CL)	(Checl	k all applicable)	
	ATE-PALMOLIV 7, 300 PARK AVI	E 11/27	n/Day/Year) /2006				Director _X_ Officer (give below) VP, In		Owner er (specify	
			mendment, Da Ionth/Day/Year		1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
NEW YOR	K, NY 10022						Person	iore man One Re	porting	
(City)	(State)	Zip) Ta	able I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Yea	Code r) (Instr. 8)	4. Securion(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/27/2006		F(1)	36	D	\$ 65.01	28,402	D		
Common Stock							112	I	By spouse	

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

Persons who respond to the collection of information contained in this form are not (9-02)

I

1,470

By Issuer's

401(k)

Plan Trustee

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required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date	Title	of		
				Code V	(A) (D)						
				Coue v	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
THOMPSON DELIA H C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE NEW YORK, NY 10022			VP, Investor Relations			

Signatures

Nina D. Gillman by power of attorney 11/29/2006

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- Payment of Medicare and income tax liability by withholding shares of stock from restricted shares previously granted under the issuer's

 Executive Incentive Compensation Plan. Ms. Thompson's holding of Colgate shares increased after the combination of this withholding and the original grant. Ms. Thompson continues to hold the restricted shares originally granted, less the amount of this required tax withholding.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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