MOISON FRANCK J

Form 4

September 15, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per response... 0.5

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

Check this box

obligations may continue. See Instruction

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

(11iii of Type	responses)									
1. Name and Address of Reporting Person * MOISON FRANCK J			Symbol		Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			COLGA	TE PAL	MOLIVE CO [CL]	(Check all applicable)				
(Last)	(First)	Middle)	3. Date of	Earliest Tr	ransaction					
		(Month/D	ay/Year)		Director	10%				
C/O COLG	VE	09/13/20	010		_X_ Officer (give	e title Other below)	er (specify			
COMPANY	Y, 300 PARK AV	ENUE				below) C.O.O	. Emerging Mk	ts.		
(Street)			4. If Ame	ndment, Da	ate Original	6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year	•)	Applicable Line)				
						X Form filed by	1 0			
NEW YOR	K, NY 10022					Form filed by N Person	Aore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative Securities Acq	uired, Disposed o	f, or Beneficial	ly Owne		
1.Title of	2. Transaction Date	e 2A. Deer	med	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Natu		
Security	(Month/Day/Year)	Executio	n Date, if	Transactio	on(A) or Disposed of (D)	Securities	Form: Direct	Indirect		
(Instr. 3)		any	, (T.7.)	Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Benefic		

(City)	(State)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	on(A) or Di	. Securities Acquired A) or Disposed of (D) Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock	09/13/2010		Code V F(1)	Amount 1,455	(D)	Price \$ 75.05	(Instr. 3 and 4) 100,470	D				
Common Stock							1,189	I	By Issuer's 401(k) Plan Trustee			

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

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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		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	*	Title	itle Number		
						LACICISAUIC		0.	of		
				Code V	(A) (D)				Shares		

Reporting Owners

10% Owner Director Officer Other

Daladianahina

MOISON FRANCK J C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE NEW YORK, NY 10022

C.O.O. **Emerging** Mkts.

Signatures

Nina D. Gillman by power of attorney

09/15/2010

**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 tax liability by withholding shares of stock from award of restricted shares vesting under the issuer's stockholder-approved Executive Incentive Compensation Plan.

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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