CLOROX CO /DE/

FORM 5
(Annual Statement of Changes in Beneficial Ownership)

Filed 8/15/2005 For Period Ending 6/30/2005

<table>
<thead>
<tr>
<th>Address</th>
<th>THE CLOROX COMPANY 1221 BROADWAY OAKLAND, California 94612-1888</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone</td>
<td>510-271-7000</td>
</tr>
<tr>
<td>CIK</td>
<td>0000021076</td>
</tr>
<tr>
<td>Industry</td>
<td>Personal &amp; Household Prods.</td>
</tr>
<tr>
<td>Sector</td>
<td>Consumer/Non-Cyclical</td>
</tr>
<tr>
<td>Fiscal Year</td>
<td>06/30</td>
</tr>
</tbody>
</table>
ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *
   TICKNOR CAROLYN M
   1221 BROADWAY
   OAKLAND, CA 946121888

2. Issuer Name and Ticker or Trading Symbol
   CLOROX CO /DE/ [CLX]

3. Statement for Issuer's Fiscal Year Ended (MM/DD/YYYY)
   6/30/2005

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
   _X_ Director
   _____ 10% Owner
   _____ Officer (give title below)
   _____ Other (specify below)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security</th>
<th>2. Trans. Date</th>
<th>2A. Deemed Execution Date, if any</th>
<th>3. Trans. Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed of (D) (Instr. 3 and 4)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
<th>8. Date Exercisable and Expiration Date (MM/DD/YYYY)</th>
<th>9. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)</th>
<th>10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>11. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred Stock Units</td>
<td>3/31/2005</td>
<td>A (2)</td>
<td>240.85</td>
<td>$0.00 Conversion Price</td>
<td>$62.99</td>
<td>D</td>
<td>Common Stock</td>
<td>240.85</td>
<td>$57.46</td>
<td>242.02</td>
<td>D</td>
</tr>
<tr>
<td>Deferred Stock Units</td>
<td>5/13/2005</td>
<td>J (4)</td>
<td>1.17</td>
<td>$0.00 Conversion Price</td>
<td>$57.46</td>
<td>D</td>
<td>Common Stock</td>
<td>1.17</td>
<td>$57.46</td>
<td>242.02</td>
<td>D</td>
</tr>
<tr>
<td>Deferred Stock Units</td>
<td>6/30/2005</td>
<td>A (5)</td>
<td>336.5</td>
<td>$0.00 Conversion Price</td>
<td>$55.72</td>
<td>D</td>
<td>Common Stock</td>
<td>336.5</td>
<td>$55.72</td>
<td>578.52</td>
<td>D</td>
</tr>
</tbody>
</table>

Explanation of Responses:

(1) $0.00 Conversion Price

(2) Annual $10,000 award of Deferred Stock Units (prorated) pursuant to the Independent Directors' Compensation Plan, plus quarterly directors' fees.

(3) The Deferred Stock Units accrued pursuant to the Independent Directors' Stock-Based Compensation Plan will be settled 100% in Clorox stock upon the reporting person's retirement or other termination of service as a Director.

(4) Deferred Stock Units acquired through dividend reinvestment during the fiscal year pursuant to the Independent Directors' Stock-Based Compensation Plan.

(5) Receipt of Deferred Stock Units in lieu of receipt of quarterly director's fee pursuant to the Independent Directors' Stock-Based...
Compensation Plan.

Reporting Owners

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>TICKNOR CAROLYN M</td>
<td></td>
</tr>
<tr>
<td>1221 BROADWAY</td>
<td>X</td>
</tr>
<tr>
<td>OAKLAND, CA 946121888</td>
<td></td>
</tr>
</tbody>
</table>

TICKNOR CAROLYN M X
1221 BROADWAY
OAKLAND, CA 946121888

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).


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 control number.

Signatures

By: By Laura Stein, Attorney-in-Fact for 8/15/2005

Date

** Signature of Reporting Person

End of Filing

© 2005 | EDGAR Online, Inc.