### FORM 4

[ ] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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**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 * **
   
   **HARAD GEORGE J**
   
   **1221 BROADWAY**
   
   **OAKLAND, CA 94612-1888**

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

3. **Date of Earliest Transaction (MM/DD/YYYY)**
   
   **6/30/2009**

4. **If Amendment, Date Original Filed (MM/DD/YYYY)**

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

6. **Individual or Joint/Group Filing (Check Applicable Line)**
   
   _X_ Form filed by One Reporting Person
   
   ___ Form filed by More than One Reporting Person

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

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</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, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred Stock Units</td>
<td><strong>0</strong> (1)</td>
<td>5/15/2009</td>
<td>A</td>
<td><em>V</em></td>
<td>85.2</td>
<td><em>D</em></td>
<td>5. <strong>Date Exercisable and Expiration Date</strong> (Instr. 3 and 4)</td>
</tr>
<tr>
<td>Deferred Stock Units</td>
<td><strong>0</strong> (1)</td>
<td>6/30/2009</td>
<td>A</td>
<td>(4)</td>
<td>425.398</td>
<td><em>D</em></td>
<td>7. <strong>Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8. <strong>Price of Derivative Security (Instr. 5)</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9. <strong>Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11. Nature of Indirect Beneficial Ownership (Instr. 4)</td>
</tr>
</tbody>
</table>

**Deferred Stock Units**

**Deferred Stock Units**

**Explanation of Responses:**

(1) 1-for-1
(2) Deferred Stock Units acquired through dividend reinvestment during the fiscal year pursuant to the Independent Directors' Deferred Compensation Plan.
(3) The Deferred Stock Units will be settled 100% in Clorox stock upon the reporting person's retirement or other termination of service as a Director.
(4) Receipt of Deferred Stock Units in lieu of receipt of quarterly director's fees.

#### Reporting Owners

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>HARAD GEORGE J</td>
<td>10% Owner</td>
</tr>
<tr>
<td>1221 BROADWAY</td>
<td>Officer</td>
</tr>
<tr>
<td>OAKLAND, CA 94612-1888</td>
<td>Other</td>
</tr>
</tbody>
</table>

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**OBM APPROVAL**

**OMB Number: 3235-0287 Expires: February 28, 2011**

Estimated average burden hours per response... 0.5
Signatures
By Angela Hilt, Attorney-in-Fact for 7/2/2009

** 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).


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.