FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL

Washington, D.C. 20549

OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 * | | | | 2. | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|---|-----------|-----------|---------------------------------|--|---|--------------------------|--|-----------------------|--|--------------------------|--|---|------------------------------------|--|---|
| ROETH GEO | RGE C | | | \mathbf{C} | LO | ROX CO |) /1 | DE/ [| CI | LX] | | | | | | |
| (Last) (First) (Middle) | | | | 3. | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | Director | Director 10% Owner | | | |
| ` , | ` , | ` | , | | | | | | | | | X Officer | (give title b | elow) | Other (s | specify |
| 1221 BROADWAY | | | | | | | | | | | | below) EVP-COO | - Housel | old | | |
| | (Street) | | | | | Amendment D/YYYY) | , Da | ate Or | igina | al Filed | | 6. Individua Line) | l or Joint | Group Fil | ing (Check | Applicable |
| OAKLAND, C | A 9461 | 2-1888 | | | | | | | | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - Non | -Deriv | ati | ve Securiti | es A | Veanii | red. | Dispose | d of, or l | Beneficially O | - | . One repond | ing rengon | |
| 1.Title of Security (Instr. 3) | | | | 2. Trar Date | | 2A. Deemed | 3. Tra Code (Instr | ans. | 4. Se Acqı Disp | ccurities aired (A) or osed of (D) r. 3, 4 and 5 | 5. An Follo (Instr | nount of Securities wing Reported Tra . 3 and 4) | Beneficially | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Ta | able II - E | Derivativ | e Securi | ties Be | nef | icially Own | ned | (e.g. | , pu | ıts, calls, | warran | ts, options, co | nvertibl | e securitie | es) | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | | 4. Trans. Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | (Instr. 5) | of derivative Securities Beneficially Owned | Ownership Form of Derivative | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exerci | sable | Expiration Date | Title | Amount or Number of Shares | | | (I) (Instr. | |
| Stock Option (Right to Buy) | \$84.4500 | 9/17/2013 | | A (1) | | 47390.0000 | | 9/17/2 | | 9/17/2023 | Common Stock | 47390.0000 | \$0.0000 | 47390.0000 | D | |

Explanation of Responses:

(1) Option vests in 4 equal installments - 1/4 on each of the first, second, third and fourth anniversaries of the grant date.

Reporting Owners

| reporting Owners | | | | | | | | |
|--------------------------------|---------------|-----------|---------------------|-------|--|--|--|--|
| Deporting Owner Name / Address | Relationships | | | | | | | |
| Reporting Owner Name / Addres | Director | 10% Owner | Officer | Other | | | | |
| ROETH GEORGE C | | | | | | | | |
| 1221 BROADWAY | | | EVP-COO - Household | | | | | |
| OAKLAND, CA 94612-1888 | | | | | | | | |

Signatures

By Angela Hilt, Attorney-in-Fact for

** 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 control number.