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 ]

5. Relationship of Reporting Person(s) to Issuer
( Check all applicable)

__ X __ Director

_____ 10% Owner

_____ Officer (give title below)

_____ Other (specify below)

1. Title of Security (Instr. 3)

Deferred Stock Units

2. Trans. Date

2A. Deemed Execution Date, if any

3A. Deemed Execution Date, if any

3. Trans. Code (Instr. 8)

V

4. Securities Acquired (A) or Disposed of (D)

(A) or (D)

5. Amount of Securities Beneficially Owned Following Reported Transaction(s)

(A) or (D)

6. Date Exercisable and Expiration Date

7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)

8. Price of Derivative Security (Instr. 5)

9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)

10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

Deferred Stock Units

$0 (1)

2/13/2009

A

78.99

(3)

(3)

Common Stock

$0

9000.15

D

Deferred Stock Units

$0 (1)

3/31/2009

A

461.344

(3)

(3)

Common Stock

461.344

$0

9461.494

D

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 1221 BROADWAY OAKLAND, CA 94612-1888</td>
<td>X</td>
</tr>
</tbody>
</table>
Signatures
By Angela Hilt, Attorney-in-Fact for  

** Signature of Reporting Person  

4/2/2009 

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.