CLOROX CO /DE/

FORM 4
(Statement of Changes in Beneficial Ownership)

Filed 1/4/2005 For Period Ending 12/31/2004

Address THE CLOROX COMPANY 1221 BROADWAY
              OAKLAND, California 94612-1888
Telephone 510-271-7000
CIK 0000021076
Industry Personal & Household Prods.
Sector Consumer/Non-Cyclical
Fiscal Year 06/30
**FORM 4**

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

---

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**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** *
   
   **MICHAEL GARY G**
   
   
   **1221 BROADWAY**
   
   **OAKLAND, CA 946121888**

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

3. **Date of Earliest Transaction**
   
   **12/31/2004**

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

---

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

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Acquired or Disposed of</th>
<th>Amount</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>12/31/2004</td>
<td>A</td>
<td>(1)</td>
<td>159</td>
<td>$58.930</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3932.000</td>
<td></td>
</tr>
</tbody>
</table>

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<table>
<thead>
<tr>
<th>Title of Derivative Security</th>
<th>Conversion or Exercise Price of Derivative Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Number of Derivative Securities Acquired or Disposed of (A) or (D)</th>
<th>Date Exercisable and Expiration Date</th>
<th>Title and Amount of Securities Underlying Derivative Security</th>
<th>Price of Derivative Security</th>
<th>Number of derivative Securities Beneficially Owned Following Reported Transaction(s)</th>
<th>Ownership Form of Derivative Security: Direct (D) or Indirect (I)</th>
<th>Ownership Form of Indirect Beneficial Ownership (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Explanation of Responses:**

(1) Receipt of Clorox Stock in lieu of receipt of director's fees 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>MICHAEL GARY G</td>
<td>X</td>
</tr>
<tr>
<td>1221 BROADWAY</td>
<td></td>
</tr>
<tr>
<td>OAKLAND, CA 946121888</td>
<td></td>
</tr>
</tbody>
</table>

**Signatures**

By: By Robin A. Stoner - Attorney-in-Fact

1/4/2005

**Signature of Reporting Person**

---

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.