1. Name and Address of Reporting Person *
EVERYBURNS WARWICK LYNTON

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

5. Relationship of Reporting Person(s) to Issuer
(Doctor) [ ] 10% Owner
[ ] X Officer (give title below) [ ] Other (specify below)
VP-GM, International

3. Date of Earliest Transaction (MM/DD/YYYY)
10/17/2005

4. If Amendment, Date Original Filed

6. Individual or Joint/Group Filing (Check Applicable Line)
[ ] 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>1. Title of Security</th>
<th>2. Trans. Date</th>
<th>3. Trans. Code</th>
<th>4. Securities Acquired (A) or Disposed of (D)</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>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>10/17/2005</td>
<td>V</td>
<td>A (1)</td>
<td>$54.37</td>
<td>10818.00</td>
</tr>
</tbody>
</table>

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

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</tbody>
</table>

Explanation of Responses:
(1) Settlement of 2002 Performance Unit Grant, which vested 9/30/05.

Reporting Owners

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>EVERYBURNS WARWICK LYNTON</td>
<td></td>
</tr>
<tr>
<td>1221 BROADWAY</td>
<td></td>
</tr>
<tr>
<td>OAKLAND, CA 946121888</td>
<td></td>
</tr>
</tbody>
</table>

Signatures

By: By Laura Stein, Attorney-in-Fact for 10/19/2005

** 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).


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.