

TICKNOR CAROLYN M
Form 5
August 15, 2005

FORM 5

OMB APPROVAL

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB Number: 3235-0362
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
Form 3 Holdings Reported Form 4 Transactions Reported

ANNUAL 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(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *
TICKNOR CAROLYN M

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)
06/30/2005

Director 10% Owner
 Officer (give title below) Other (specify below)

1221 BROADWAY

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

OAKLAND, CA 946121888

Form Filed by One Reporting Person
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 2270 (9-02)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)
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Security				(D) (Instr. 3, 4, and 5)				Title	Amount or Number of Shares	
	(A)	(D)	Date Exercisable	Expiration Date						
Deferred Stock Units	Â	03/31/2005	Â	A ⁽²⁾	240.85	Â	Â ⁽³⁾	Â ⁽³⁾	Common Stock	240.85
Deferred Stock Units	Â	05/13/2005	Â	J ⁽⁴⁾	1.17	Â	Â ⁽³⁾	Â ⁽³⁾	Common Stock	1.17
Deferred Stock Units	Â	06/30/2005	Â	A ⁽⁵⁾	336.5	Â	Â ⁽³⁾	Â ⁽³⁾	Common Stock	336.5

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
TICKNOR CAROLYN M 1221 BROADWAY OAKLAND, CA 946121888	Â X	Â	Â	Â

Signatures

By: By Laura Stein,
Attorney-in-Fact for

08/15/2005

__Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) \$0.00 Conversion Price
 - (2) Annual \$10,000 award of Deferred Stock Units (prorated) pursuant to the Independent Directors' Compensation Plan, plus quarterly directors fees.
 - (3) The Deferred Stock Units accrued pursuant to the Independent Directors' Stock-Based Compensation Plan will be settled 100% in Clorox stock upon the reporting person's retirement or other termination of service as a Director.
 - (4) Deferred Stock Units acquired through dividend reinvestment during the fiscal year pursuant to the Independent Directors' Stock-Based Compensation Plan.
 - (5) Receipt of Deferred Stock Units in lieu of receipt of quarterly director's fee pursuant to the Independent Directors' Stock-Based Compensation Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.