

CLOROX CO /DE/
Form 3
July 29, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â EVERYBURNS WARWICK LYNTON		(Month/Day/Year) 07/20/2005	CLOROX CO /DE/ [CLX]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1221 BROADWAY			(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
OAKLAND,Â CAÂ 946121888			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) VP-GM, International	<input type="checkbox"/> Form filed by More than One Reporting Person
(City)	(State)	(Zip)		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,159	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title			

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		Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy) - 00AD	06/30/2002	04/26/2010	Common Stock	7,000	\$ 35.78	D	Â
Stock Option (Right to Buy) - 00AM	10/16/2004	10/16/2011	Common Stock	8,355	\$ 35.13	D	Â
Stock Option (Right to Buy) - 01AM	10/16/2004	10/16/2014	Common Stock	30,000	\$ 35.13	D	Â
Stock Option (Right to Buy) - 02AO	09/30/2005 ⁽¹⁾	09/18/2012	Common Stock	13,000	\$ 41.98	D	Â
Stock Option (Right to Buy) - 03AX	09/17/2007 ⁽²⁾	09/17/2013	Common Stock	11,500	\$ 45.25	D	Â
Stock Option (Right to Buy) - 04CQ	09/15/2008 ⁽²⁾	09/15/2014	Common Stock	15,500	\$ 53.88	D	Â
Stock Option (Right to Buy) - 99AI	09/29/2002	09/29/2009	Common Stock	4,701	\$ 38.84	D	Â
Stock Option (Right to Buy) - 99AL	09/29/2002	09/29/2009	Common Stock	14,922	\$ 38.84	D	Â
Stock Option (Right to Buy) - 99N	05/06/2009 ⁽³⁾	05/06/2009	Common Stock	13,000	\$ 67.38	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
EVERYBURNS WARWICK LYNTON 1221 BROADWAY OAKLAND, CA 946121888	Â	Â	Â VP-GM, International	Â

Signatures

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

07/29/2005

__Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Option exercisable in 3 equal installments - 1/3 on each of the first, second and third anniversaries of the grant date.
- (2) Option exercisable in 4 equal installments - 1/4 on each of first, second, third and fourth anniversaries of the grant date.
- (3) Vesting date depends on Total Shareholder Return.

Note: File three copies of this Form, one of which must be manually signed. If space 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.