FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* | | | | | | 2. Issuer Name and Ticker or Trading Symbol CVB FINANCIAL CORP [CVBF] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|--|---|-------------------------------|--|---|---|------|---|-----------------------------|-----------------|---|---------|---|--|---|---|--|---|
| VACCARO SAN | | | | | | | | | | | | | | X | Directo | r | 10% Owner | | vner |
| (Last) 701 N. H | ast) (First) (Middle) 01 N. HAVEN AVE. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/22/2007 | | | | | | | | | Officer (give title Other (specify below) below) | | | | specify |
| (Street) ONTARIO CA 91764 | | | | - 4. I | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriv | /ativ | e Se | curities | s Ac | quired, I | Disp | osed o | of, or Bo | enefi | cially | / Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (li | Transaction Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transact (Instr. 3 | ion(s) | | | (Instr. 4) |
| Common Stock 10/22/ | | | | | | /2007 | | | М | | 81,23 | 9 A | A \$4.9 | | 7 70,469 | | | D | |
| | | - | Fable II - | | | | | | uired, Di , options | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | ate, Transactio Code (Inst | | | | | 6. Date Exe Expiration (Month/Day | Date | | 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4) | | Derivative Security | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | i | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | expiration pate | Title | or | ount nber res | | | | | |
| Stock Option (right to buy) | \$4.97 | 10/22/2007 | | | М | | 81,239 | | 08/16/2000 | 0 | 8/16/2010 | Commor Stock | 81, | 239 | \$4.97 | 70,469 |) | D | |

Explanation of Responses:

San E Vaccaro

10/25/2007

** Signature of Reporting Person

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).
- ** 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 Number.