FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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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* Myers Christopher D 2. Date of Event Requiring Statement (Month/Day/Year) 08/01/2006			nent	3. Issuer Name and Ticker or Trading Symbol CVB FINANCIAL CORP [CVBF]							
(Last) 701 N. HAVE (Street) ONTARIO (City)	(First) EN AVENUE # CA (State)	(Middle) \$350 91764 (Zip)				tionship of Reporting Person call applicable) Director Officer (give title below) President & Cl	10% Owner Other (spe below)	er	(Mon	th/Day/Year) dividual or Joint cable Line) Form filed by	Ate of Original Filed //Group Filing (Check by One Reporting Person by More than One berson
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						at of Securities Illy Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ct (D)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
No Securities are beneficially owned						0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conv. or Ex		Conve or Exe	rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiratio Date	n Title	3	Amount or Number of Shares	Price of Derivation Securi	tive	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

Christopher D Myers

08/03/2006

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).