FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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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).

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Name and Address of Reporting Person* GRISKO JEROME P					2. Issuer Name and Ticker or Trading Symbol CBIZ, Inc. [CBZ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
GRISK	<u>O JERC</u>	<u>ME P</u>				SDIE, Inc. [SDE]									Direc	ctor	10%	Owner		
				2 0	O Date of Farling Transaction (Marth (Day))								\dashv	X	Offic belov	er (give title w)	Othe belov	r (specify v)		
(Last)	(First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/17/2014								President and COO						
6050 OA	K TREE	BLVD.			03/	1//2	014										residen	tuna 000		
SUITE 5	00																			
COLLEG					1 If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6	6. Individual or Joint/Group Filing (Check Applicable					
					- 4. "	4. II Amendment, Date of Original Filed (Month/Day/Year)									Line)					
(Street)															X	Forn	n filed by One	e Reporting Per	son	
CLEVEL	AND (OH	44131														•	re than One Re		
-					-											Pers		e than one ive	porting	
(City)	(State)	(Zip)																	
. ,,																				
		Tal	ole I - No	n-Deriv	ative	Sec	curitie	s Acc	uired	, Dis	posed o	f, o	r Ber	efici	ally	Owne	ed			
1. Title of S	Security (In	str. 3)		2. Transa	action								ount of	6. Ownership	7. Nature					
				Date (Month/D	av/Vea	Execution Date, y/Year) if any			Transaction Disposed Of Code (Instr.		Of (D	Of (D) (Instr. 3, 4 a		nd 5) Securi Benefi			Form: Direct (D) or Indirect	of Indirect Beneficial		
(MONUNDS				ayrıca			nth/Day/Year)	8)					Owned Following (i)		(I) (Instr. 4)	Ownership				
									(A) or			Repo		ted action(s)		(Instr. 4)				
								Code	٧	Amount		(A) or (D)	Price		(Instr. 3 and 4)					
Common Stock ⁽¹⁾ 03/17/2					/2014	2014		P		64.99 A		\$9.0	0505 417,473.46		D					
		-	-1-1-11	D				A								1			<u>'</u>	
											osed of, onvertib				y Ov	vnea				
1. Title of	2.	3. Transaction	3A. Deen	and I	4.		E Nu	mbor	6 Data F	Everei	cable and	7 7	Title one		0 Dr	ioo of	9. Number o	f 10.	11. Nature	
Derivative	Conversio		Executio			ransaction				6. Date Exercisable and Expiration Date		7. Title and Amount of			8. Price of Derivative		derivative	Ownership	of Indirect	
Security or Exercise (Month/Day/Year) if any (Month/Day/ (Instr. 3) Price of Derivative (Month/Day/Year)			(Vaar)	Code (Ins				(Month/I	(Month/Day/Year) Securitie					Secu		Securities	Form:	Beneficial		
			ay/Year) 8)		Securities Acquired					Underlying Derivative		(Instr. 5)		Beneficially Owned	Direct (D) or Indirect	Ownership (Instr. 4)				
Security					(A) or Security (Instr.						nstr. 3	3		Following	(I) (Instr. 4)	, ,				
				of (D) (Instr. 3, 4			and 4)						Reported Transaction	(s)						
													(Instr. 4)							
					and 5)	<u> </u>												
														nount				- 1		
									or Nu	ımber				- 1	1					
			.					Expiration		of					- 1	1				
			1		Code	٧	(A)	(D)	Exercisa	able	Date	Title	le Sh	ares				- 1	1	

Explanation of Responses:

1. Purchased under the Amended and Restated CBIZ 2007 Employee Stock Purchase Plan approved by Shareholders at the 2011 Annual Meeting. Cost of purchasing stock under the Plan is 15% less than FMV as defined by the Plan.

Remarks:

Michael W. Gleespen, Attorney-In-Fact for Jerome P. 03/18/2014 Grisko

** 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.