FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	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

						_		. ,															
Name and Address of Reporting Person* OBYRNE ROBERT								2. Issuer Name and Ticker or Trading Symbol CBIZ, Inc. CBZ									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
OBYR	<u>NE RU</u>	BE	<u>KI</u>			1	CDIE, IIIC. [CDE]										Direc	ctor		10% C	wner		
							O Date of Farling Transporting (Marth (Day (March									X Office below		ficer (give title low)		Other (specify below)			
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 03/17/2008									Senior Vice President							
6050 OAK TREE BLVD.						03/	05/1//2000											ocinor vic	cc i icc	naciii			
SUITE 500																							
30111 300							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
						T. II Amendment, Date of Original Fried (Month/Day/Tear)										Line)							
(Street)																X	Form	n filed by One	e Repor	ting Pers	on		
CLEVELAND OH 44131			4131												Form filed by More than One Reporting								
																	Person						
(City)	((State	e) (2	Zip)																			
			Tabl	e I - Nor	า-Deriv	ative	Se	curitie	s Acc	uired,	Dis	posed o	of, o	r Ben	efici	ally (Owne	ed					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						:h/Day/Year) Ex		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis		Disposed	R. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 Disposed Of (D) (Instr. 3, 4			4 and Sec Ber Ow		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
											v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock ⁽¹⁾ 03/17/							7/2008					3,662	2	A \$8.0		03 ⁽¹⁾ 447,46		7,465.06		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																							
1. Title of	2.	3	3. Transaction		4.	uns			6. Date Exercisable and			7. Title and			8. Price of		9. Number o	of 10.		11. Nature			
Derivative Security (Instr. 3)	Conversio or Exercise Price of Derivative Security	se (Date (Month/Day/Year)	Execution if any (Month/Da	·		Transaction Code (Instr.		of		Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr and 4)		Deriv Secu (Insti	ivative urity	derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	rm: rect (D) Indirect	Beneficial Ownership (Instr. 4)		
						Code	v	(A)		Date Exercisa		Expiration Date	Titl	or Nui of	ount mber								

Explanation of Responses:

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

Michael W. Gleespen,

Attorney-In-Fact for Robert A. 03/18/2008

O'Byrne

** 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.