FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Was	hingt	ton,	D.C.	205	49

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number

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

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person* SLOTKIN TODD J					2. Issuer Name and Ticker or Trading Symbol CBIZ, Inc. [CBZ]									Check all ap	ationship of Reporting c all applicable) Director Officer (give title below)		g Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) 888 PARK AVENUE, APT 12B						3. Date of Earliest Transaction (Month/Day/Year) 02/24/2009												Other below)	(specify
(Street) NEW YORK NY 10075 (City) (State) (Zip)				_ 4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)							5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tabl	le I - Noi	n-Deriv	vative	Se	curitie	es Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally Own	ed			
Da				Date	Date (Month/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Secu Bene	ficially ed Following	For (D)	Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	() (I	A) or O)	Price	Trans	saction(s) :. 3 and 4)			(IIISU. 4)
Common	Stock			02/2	4/2009	1/2009			S		6,000) D \$		\$ 6 .	5.84 29,000			D	
		Та									sed of, onvertib				y Owned	I			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date (Month/Day/Year) Fixed of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) Fixed or Execution Date, if any (Month/Day/Year)		Date,		Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative vrities iired r osed) r. 3, 4 5)	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

Michael W. Gleespen, Attorney-in-Fact for Todd

02/25/2009

Slotkin

** 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.