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

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*  GERARD STEVEN L						2. Issuer Name <b>and</b> Ticker or Trading Symbol CBIZ, Inc. [ CBZ ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) (First) (Middle) 6050 OAK TREE BLVD. SUITE 500						3. Date of Earliest Transaction (Month/Day/Year) 03/03/2010								X Office below	Officer (give title Other (specify below)  Chief Executive Officer				
(Street) CLEVELAND OH 44131					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Form Form	Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City)	City) (State) (Zip)													reiso	. 5.55				
		Tak	le I - No	n-Der	ivativ	e Se	curi	ties Ac	quired	, Dis	sposed o	f, or Be	neficia	ılly Owne	t				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ar)   I	P.A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			Benefic Owned	ies ially Following	6. Own Form: I (D) or I (I) (Inst	Direct condirect E	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reporte Transa (Instr. 3	ction(s)		1	Instr. 4)	
Common Stock <sup>(1)</sup> 03/0					3/2010	,			М		17,055	A	\$4.	3 711,	373.17	I	)		
Common Stock 03/0				3/2010	)			F		13,500	D	\$6.34	(5 <sup>(2)</sup> ) 697	873.17	D				
Common Stock <sup>(1)</sup> 03/04				4/2010	)			M		5,788	A	\$4.	3 703	661.17	D				
Common Stock 03/04/				4/2010	2010			F		4,600	D	\$6.3	699	061.17	I	)			
Common Stock <sup>(1)</sup> 03/05/2				5/2010	2010			M		7,157	A	\$4.	3 706	218.17	I	)			
Common Stock 03/05/2				5/2010	1010			F		5,759	D	\$6.30	700,	00,459.17		)			
		•	Γable II ·								osed of, converti			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed Date,	4. Transa Code ( 8)	ction	5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and te	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	wnership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amoun or Number of Shares	r					
Employee Stock Options <sup>(1)</sup>	\$4.3	03/03/2010			М			17,055	05/04/20	005	05/04/2010	Common Stock	17,05	5 \$4.3	552,94	15	D		
Employee Stock Options <sup>(1)</sup>	\$4.3	03/04/2010			M			5,788	05/04/20	005	05/04/2010	Common Stock	5,788	\$4.3	547,15	57	D		
Employee Stock	\$4.3	03/05/2010			M			7,157	05/04/20	005	05/04/2010	Common Stock	7,157	\$4.3	540,00	00	D		

## **Explanation of Responses:**

- 1. Employee Stock Options granted 5-4-2004 at 4.30 exercise price, expiring 5-4-2010. Exercise of options and sale of shares to cover exercise price, taxes and fees.
- 2. Average price, range sold between \$6.29 and \$6.38.
- 3. Average price, range sold between \$6.30 and \$6.31.
- 4. Average price, range sold between \$6.30 and \$6.3118.

Michael W. Gleespen,

Attorney-In-Fact for Steven L. 03/05/2010

Gerard

\*\* 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.