## Edgar Filing: GERARD STEVEN L - Form 4

GERARD S	TEVEN L											
Form 4												
July 17, 201	2											
FORM	ΛΔ								OMB AF	PPROVAL		
	UNITED	STATES		RITIES A shington			NGE CO	OMMISSION	OMB Number:	3235-0287		
Check th									Expires:	January 31,		
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHI				ERSHIP OF	Estimated a	2005 Werage		
Section	Section 16.				SECURITIES				burden hours per			
Form 4 o Form 5					a				response	0.5		
obligatio	-						-	Act of 1934,				
may con				•	•	· ·		1935 or Section	1			
See Inst	ruction	30(n)	of the Ir	nvestment	Compa	ny Ac	t of 1940	)				
1(b).												
(Print or Type	Responses)											
1. Name and Address of Reporting Person *       2. Issuer Name and Ticker or Trading       5. Relationship of							5. Relationship of	Reporting Person(s) to				
GERARD STEVEN L Symbol				<sup>bol</sup> Z, Inc. [CBZ]				Issuer				
								(Check all applicable)				
(Last)	(First) (A	Middle)	3. Date o	of Earliest T	ransaction	1		(Cheek	an appricable	()		
			(Month/I	Day/Year)				_X_ Director		Owner		
	TREE BLVD., S	UITE	07/16/2	2012				_X_ Officer (give below)	title Othe below)	er (specify		
500								· · · · · · · · · · · · · · · · · · ·	xecutive Offic	er		
	(Street)		4. If Am	endment, D	ate Origir	al	(	6. Individual or Joi	nt/Group Filir	g(Check		
			-				Applicable Line)					
							-	_X_ Form filed by O				
CLEVELA	ND, OH 44131						-	Form filed by Me Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivativ	e Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deem	ned	3.	4. Secur	ities Ac	quired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if	Transaction Disposed of (D)				Securities	Ownership	Indirect		
(Instr. 3)		any (Month/Day/Year)		Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially Owned	Form:	Beneficial Ownership		
		(Monui/D	ay/1cal)	(11150.0)				Following	Direct (D) or Indirect	(Instr. 4)		
						(A)		Reported	(I)	, ,		
						(A) or		Transaction(s)	(Instr. 4)			
				Code V	Amoun	(D)	Price	(Instr. 3 and 4)				
Common Stock (1)	07/16/2012			Р	192.79	А	\$ 6.1021	862,076.41	D			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
GERARD STEVEN L 6050 OAK TREE BLVD. SUITE 500 CLEVELAND, OH 44131	Х		Chief Executive Officer					
Signatures								
Michael W. Gleespen, Attorney- Gerard	07/17/2012							
<u>**</u> Signature of Reporti	Date							

## **Explanation of Responses:**

- \* 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).
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.