FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL								
	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

1. Name and Address of Reporting Person* HWP II LLC					2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AHS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Vother (specify					
(Last) (First) (Middle) C/O HAAS WHEAT & PARTNERS LP 300 CRESCENT COURT, SUITE 1700				3. Date of Earliest Transaction (Month/Day/Year) 04/22/2005										below) See "Explanation of Responses"					
(Street) DALLAS (City)			75201 Zip)		4. If <i>i</i>	Ameno	dment,	Date o	f Original	l Filed	d (Month/Da	ay/Year)	6. Lir	ne) X Fo	or Joint/Grou orm filed by Or orm filed by Merson	ne Reporting	Person	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of (D) (Instr. 3, 4) 5)				Secu Bene	nount of irities eficially ed Following	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	t Indir ect Bene Own	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A (D) or)	Price	Tran	saction(s) r. 3 and 4)		(inst	(Instr. 4)
Common Stock, par value \$0.01 per share 04/22/2					2005			S		115,44	1	D	\$14		533,603		See foot	e otnote ⁽¹⁾	
	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. Transaction Code (Instr. 8)		of		6. Date Exercis Expiration Dat (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivativ Security (Instr. 5)		Owner Form: Direct or Indi (I) (Ins	ship of I Bei (D) Ow rect (Ins	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A)		Date Exercisa	ble	Expiration Date	Title	or	ount nber res					

lanation of Responses:

1. The Reporting Person is the general partner of HWP II, L.P., which is the general partner of HWP Capital Partners II, L.P., and may be deemed to beneficially own the securities held by HWP Capital Partners II, L.P. The Reporting Person disclaims beneficial ownership of such securities in excess of its direct or indirect interest in the profits or capital accounts of HWP II, L.P. or HWP Capital Partners II, L.P. and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of these securities in excess of such amount.

The Reporting Person may be deemed a member of a Section 13(d) group that owns more than 10% of the Issuer's outstanding Common Stock. However, the Reporting Person disclaims such group membership, and this report shall not be deemed an admission that the Reporting Person is a member of a Section 13(d) group that owns more than 10% of the Issuer's outstanding Common Stock for purposes of Section 16 or for any other purpose.

/s/ Robert B. Haas, Managing 04/26/2005 Member

** 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.