## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## 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*						2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HWH NIGHTINGALE PARTNERS LP						AHS ]									Dire	ctor	X	10% C	wner
(Last) (First) (Middle)					- [	1									Offic belo	er (give title w)	Х	Other below)	(specify
C/O HAAS WHEAT & PARTNERS LP						3. Date of Earliest Transaction (Month/Day/Year) 05/27/2005								See "Explanation of Responses"					
300 CRESCENT COURT, SUITE 1700																			
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
DALLAS TX 75201														X Form filed by One Reporting Person					
				-										Form filed by More than One Reporting Person					
(City)	(St	ate) (2	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transactio Date (Month/Day/N						Execution Date		ate,	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at		nd 5) Securi Benefi		icially d Following	Forn (D) c	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Price		е	Trans	nsaction(s) etr. 3 and 4)			(1130.4)
Common Stock, par value \$0.01 per share 05/27/20					2005	)5		S		3,788,880	,880 D		3.1312	.312 0			D		
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)	ve Conversion Date Execution or Exercise (Month/Day/Year) if any			4. Transactior Code (Instr 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount of Orbital Security (Instr. 3 orbital S		Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

**Explanation of Responses:** 

## Remarks:

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. HWH NIGHTINGALE PARTNERS, L.P. By: HWH NIGHTINGALE, L.P., its General Partner By: HWH NIGHTINGALE, L.L.C., its General Partner By: HWH NIGHTINGALE, L.L.C., its General Partner By: Haas, Managing Member

> /s/ Robert B. Haas, Managing 05/31/2005 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.