FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

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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* Weaver Paul E					AN	2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AMN									theck all a	nip of Reportir oplicable) ector	ng Per	rson(s) to Is	
(Last) (First) (Middle) 132 LONE TREE FARM ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/30/2018										Officer (give title below)		Other (below)	(specify
(Street) NEW CA	NAAN CI		06840 Zip)		4. If	Ame	ndment	, Date o	of Original	Filed	(Month/Da	ay/Year)		ne) <mark>X</mark> Foi Foi	or Joint/Group or filed by On or filed by Mo or son	e Rep	orting Pers	on
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ar) E	Executio f any	. Deemed ecution Date, iny onth/Day/Year)				ities Acquired (A) d Of (D) (Instr. 3, 4			nd Secu Bene Own	nount of rities ficially ed Following	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount (A) or (D)			Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 1			11/30	0/2018				S		5,000 I		D	\$ <mark>64</mark>	.5	38,022		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Date, Transaction Code (Ins					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		, E	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nun of Sha	ber					

Explanation of Responses:

Remarks:

/s/ Denise L. Jackson, as
Attorney-In-Fact on behalf of 12/04/2018
Paul E. Weaver

** 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.