FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
Estimated average burden							
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* FOLETTA MARK G							2. Issuer Name <b>and</b> Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AMN ]								**			Owner	
(Last) (First) (Middle) 12400 HIGH BLUFF DRIVE SUITE 100						3. Date of Earliest Transaction (Month/Day/Year) 12/15/2016								_	Offic belov	er (give title w)	Other below	(specify	
(Street) SAN DIEGO CA 92130  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	d, Dis	sposed o	f, or E	Benef	icially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)						Execution Date,						es Acquired (A) o Of (D) (Instr. 3, 4 a			Securi Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	Pri	ce	Transa	action(s) 3 and 4)		(111501.4)	
Common Stock 12/15/20							016		S		1,800 D		\$3	87.81 <sup>(1)</sup>	3,732		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. Dee Executi if any (Month/		4. Transa Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		Der Sed (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					

## **Explanation of Responses:**

1. The price reported in this row represents a weighted average price of \$37.81 per share. These shares were sold in multiple transactions at prices ranging from \$37.805 to \$37.83, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price.

## Remarks:

/s/ Denise L. Jackson, as

Attorney-In-Fact on behalf of 12/16/2016

Mark G. Foletta

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.