FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

washington,	D.C.	2054

wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		
	Father and account to the second			

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* STERN ANDREW M					Al	2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AMN								5. Relationship (Check all appli X Director		olicable)	g Person(s) to I	
			3. 🗅	3. Date of Earliest Transaction (Month/Day/Year) 11/09/2017									Office	er (give title w)	Other below	(specify		
(Street) DALLAS (City)	S T>	ζ 7	75240 (Zip)		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							5. Indiv ₋ine) X	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	le I - N	lon-Deriv	/ative	Seci	uritie	s Ac	quire	ed, D	isposed o	f, or E	Benefici	ially (Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/You			.	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of (D) (Instr. 3, 4)			d (A) or r. 3, 4 and	nd 5) Secu Bene		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price		Trans	action(s) 3 and 4)		(,	
Common	Stock			11/09/2	017	17		S		10,000	D	\$42.89	.8911(1)		6,668	D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8)		4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares				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)					

Explanation of Responses:

1. The price reported on this Form 4 represents a weighted average price of \$42.8911 per share. These shares were sold in multiple transactions at prices ranging from \$42.8424 to \$42.93, 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 11/13/2017

Andrew M. Stern

** 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.