FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto	on, D.C.	20549

STATEMENT	OF (CHANGES	IN RENE	FICΙΔΙ	OWNERS	ΗΙΡ
STATEMENT	OF (SHANGES		FICIAL	OWNERS	ПІГ

OMB APPRO	DVAL
OMB Number:	3235-0287
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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* JOHNS MICHAEL M E			AN	2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC [AMN]							5. Relationship of Reporting Person(s) to (Check all applicable) X Director 10%							
										AM		X		er (give title	10% C	owner (specify		
(Last) (First) (Middle)				\vdash										belov		below		
12400 HIGH BLUFF DRIVE SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2019													
				_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street)														X Form filed by One Reporting Person				
SAN DIE	EGO CA	A 9	2130												Form filed by More than One Reporting			
					-										Pers	son		
(City)	(St	ate) (.	Zip)															
		Tabl	e I - 1	lon-Deriv	ative	Secu	uritie	s Ac	quir	ed, Di	isposed o	f, or E	Benefici	ially (Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date,		·	3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar				d 5) Secur Benef Owne		rities Fe ficially (E ed Following (I)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	V	Amount	(A) or (D)	Price			action(s) 3 and 4)		(Instr. 4)	
Common Stock 11/04/201			019				S		2,659	D	\$59.87	83(1)	4	40,000	D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Derivative Conversion Date Execution Date, To Conversion or Exercise (Month/Day/Year) if any		4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				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 Exer	cisable	Expiration Date	Title	Number of Shares					

Explanation of Responses:

1. The price reported in this row represents a weighted average price of \$59.8783 per share. These shares were sold in multiple transactions at prices ranging from \$59.87 to \$59.95, 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 11/06/2019

Michael M.E. Johns, M.D.

** 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.