Instruction 1(b)

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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* STERN ANDREW M				2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SIEKIN	ANDRE	<u>/V 1V1</u>			AHS	1								X	Directo	r		10% Ov	vner	
(1+)	(Final		#: -I -II - \			_									Officer below)	(give title		Other (s	specify	
(Last) (First) (Middle)					3. Da	Date of Earliest Transaction (Month/Day/Year)									below)			below)		
C/O SUNWEST COMMUNICATIONS, INC				04/1	04/18/2007															
2 LINCOI	LN CENTR	E			4 If /	mon	dmont F	nato c	of Original	Filod	(Month/Day	v/Voor)		S Indi	ividual or 1	oint/Croup	Eiling	(Chock Apr	alicable	
					4.117	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) DALLAS	TX	7	E240											X	Form fi	led by One	e Repo	orting Perso	n	
DALLAS TX 75240																Form filed by More than One Reporting				
(City)	(Sta	te) (Z	Ľip)												Person	l				
		Tabl	e I - Non-	Deriva	ative	Sec	urities	Ac	quired,	Dis	posed o	f, or Be	nefici	ally	Owned					
1. Title of Se	curity (Instr.	3)		2. Transa	action												6. Ownership		7. Nature of	
			Date (Month/E	e onth/Day/Year)		Execution Date, if any (Month/Day/Yea		Code (Instr.				str. 3, 4 a	and	Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)	r Indirect str. 4)	Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pric	e e	Reported Transacti (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock															500			D		
		Ta	able II - D								osed of, onvertil			•	Owned					
1. Title of	2.	3. Transaction	3A. Deemed		4.		5. Num					7. Title a			8. Price of	9. Numbe	r of	10.	11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	nversion Date (Month/Day/Year) ce of rivative		Date, Transac Code (I y/Year) 8)			tion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		е	of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership	p of Indirect Beneficial Ownership t (Instr. 4)	
				Ī									Amou	ınt						
													or Numb	er						
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	of Share							
Restricted Stock Units	(1)	04/18/2007			A		4,048	(-)	(2)	_	04/18/2017	Common	+	_	\$0	4,048	3	D		
Stock Appreciation Rights	\$24.95	04/18/2007			A		3,482		(3)	1	04/18/2017	Common Stock	3,48	32	\$0	3,482	2	D		
Stock Options (Right to buy)	\$9.68								05/08/20	04	05/08/2013	Common Stock	6,00	00		6,000)	D		
Stock Options (Right to buy)	\$14.94								05/18/20	05 (05/18/2014	Common Stock	60,0	00		60,00	0	D		
Stock Options (Right to	\$22.98								01/17/20	03 (01/17/2012	Common	9,00	00		9,000)	D		

Explanation of Responses:

- 1. The Restricted Stock Units were granted pursuant to the AMN Healthcare Equity Plan. Each Restricted Stock Unit represents a contingent right to receive one share of Common Stock.
- 2. The Restricted Stock Units vest in the incremental amount of 33% on the earlier of (i) April 18, 2008 or (ii) the date of the Company's 2008 Annual Meeting of Stockholders; 34% on the earlier of (i) April 18, 2010 or (ii) the date of the Company's 2010 Annual Meeting of Stockholders.
- 3. The Stock Appreciation Rights vest on the earlier of (i) April 18, 2008 or (ii) the Company's Annual Meeting of Stockholders.

Andrew M Stern

04/20/2007 ** 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.