FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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*  WHEAT DOUGLAS D						2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC [ AHS ]								elationship o ck all applic Director Officer below)	able)	g Perso	10% Ow Other (s	ner
(Last) (First) (Middle) 180 STATE STREET SUITE 230							3. Date of Earliest Transaction (Month/Day/Year) 04/22/2015										below)	
(Street) SOUTHLAKE TX 76092  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable )  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D						2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquir Disposed Of (D) (Instr. 9)			es Acquired	I (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
						(worthin bay) real)		Code	v	Amount	nount (A) or (D) Pr		Reported	orted saction(s)			(Instr. 4)	
Common	Stock		ve Securities Acquired, Disposed ats, calls, warrants, options, conve						or Bene	eficially Owned								
1. Title of Derivative Security (Instr. 3)	Conversion Date Executor Exercise (Month/Day/Year) if any		3A. Deemed Execution D	eate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			xerci on Dat	sable and	7. Title and of Securiti Underlying Derivative (Instr. 3 ar	d Amount es g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e O' s Fo lly Di oi (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)			
Restricted Stock Units	(2)	04/22/2015			М			10,490	(3)		(4)	Common Stock	10,490	\$0.00	0		D	
Restricted Stock Units	(2)	04/22/2015			A		5,532		(5)		(4)	Common Stock	5,532	\$0.00	5,532	2	D	

## **Explanation of Responses:**

- 1. Common Stock acquired on the vesting of Restricted Stock Units.
- 2. 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.
- 3. The Restricted Stock Units identified in this row were granted on April 23, 2014 and vest on the earlier of (i) the first anniversary of the grant date or (ii) the date of the Company's 2015 Annual Meeting of Stockholders. The Company's 2015 Annual Meeting of Stockholders was held on April 22, 2015. Accordingly, the number of Restricted Stock Units identified in this row (i.e., 10,490) vested on April 22, 2015.
- 4. Restricted Stock Units do not have an expiration date.
- 5. The Restricted Stock Units identified in this row were granted on April 22, 2015 and vest on the earlier of (i) the one year anniversary of the grant date or (ii) the date of the Company's 2016 Annual Meeting of Stockholders

## Remarks:

/s/ Denise L. Jackson, as Attorney-In-Fact on behalf of 04/24/2015 Douglas D. Wheat

\*\* 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.

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