FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL					
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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* HAAS ROBERT B						2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC [AHS]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director X 10% Owner Officer (give title Other (spe							
	(Last) (First) (Middle) C/O HAAS WHEAT & PARTNERS 300 CRESCENT COURT, SUITE 1700						Earlies 05	Trans	action (Mont	th/Day/Year)		belov	w)		be	ow)					
Street) DALLAS TX 75201 (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						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
Date				2. Transaction Date (Month/Day/Ye	ar) E	P.A. Deemed Execution Date, f any Month/Day/Year)		Cod	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficially Owned Fol		s Ily	6. Owners Form: Dir (D) or Ind ring (I) (Instr.		ct Indirect ect Beneficial Ownership			
								Cod	de V	Ar	mount	(A) or (D)	Price		Reported Transaction (Instr. 3 a				(Instr. 4)			
Common share ("Co	05/27/200	5			S		4	,942,800	D	\$13.13	12	0		I		See footnot	es ⁽¹⁾⁽²⁾					
Common	Stock	05/27/200	5			S		3	,788,880	D	D \$13.13		0		I		See footnot	es ⁽¹⁾⁽³⁾				
Common Stock 05				05/27/200	5			S	S		,366,020	D	D \$13.1312		0		I		See footnot	es ⁽¹⁾⁽⁴⁾		
Common Stock				05/27/2005				S	S		533,603	D	D \$13.1312		0		I		See footnot	es ⁽¹⁾⁽⁵⁾		
		Та	ble	II - Derivat (e.g., p							oosed of, convertil				Owned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date, 1y nth/Day/Year)	4. Transa Code (8)		5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5	ative ities red sed 3, 4	Expiratio (Month/D			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		3		9. Numb derivativ Securitic Benefici Owned Followin Reporte Transac (Instr. 4)	/e es ally ng d tion(s)	10. Owners Form: Direct (I or Indire (I) (Instr	nip of In Bend Own ct (Inst	Nature ndirect eficial nership tr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Number of Shares	r								

Explanation of Responses:

- 1. The sole general partner of HWH Capital Partners, L.P. ("HWH Capital"), HWH Nightingale Partners, L.P. ("HWH Nightingale"), HWP Nightingale Partners II, L.P. ("HWP Nightingale") and HWP Capital Partners II, L.P. ("HWP Capital" and, together with HWH Capital, HWH Nightingale and HWP Nightingale, the "Funds") is either a limited liability company or a corporation, in each case controlled by Mr. Haas. By virtue of his control over each such limited liability company and corporation, Mr. Haas has indirect ownership of 10,631,303 shares. Mr. Haas's pecuniary interest in these shares is limited to his percentage interest in the Funds' interests in such shares.
- 2. By HWH Capital
- 3. By HWH Nightingale
- 4. By HWP Nightingale
- 5. By HWP Capital

/s/ Robert B. Haas

05/31/2005

** 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.