Edgar Filing: WARD JONATHAN W - Form 4/A

WARD JONA	ATHAN W										
Form 4/A											
October 12, 2	2010										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	UNIT	ED STATES		ATTIES A			NGE (COMMISSION	OMB Number:	3235-0287	
Check this if no long								January 31,			
subject to Section 10	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: 2005 Estimated average burden hours per				
Form 4 or Form 5			~		~				response 0.5		
obligation may conti <i>See</i> Instru	nue. Section	17(a) of the	Public Ut		ing Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40	n		
1(b).											
(Print or Type R	esponses)										
1. Name and Ad WARD JON	2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer					
			CROSS COUNTRY HEALTHCARE INC [CCRN]					(Check all applicable)			
(Last)	(First)	(Middle)		Earliest Tra	ansaction			Director X Officer (give		Owner er (specify	
6551 PARK BLVD., N.W	OF COMME	RCE	(Month/D 10/01/20	-				below)	below) bess Country Sta		
	(Street)		4. If Ame	ndment, Dat	e Original			6. Individual or Jo	oint/Group Filin	1g(Check	
				th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
BOCA RAT	ON, FL 3348	7	10/05/20	010				_X_ Form filed by 0 Form filed by N Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execution any	emed on Date, if 'Day/Year)	3. Transactic Code (Instr. 8)		spose	d of	Securities Beneficially (Owned	6. Ownership Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership	
				Code V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)	
Common Stock (1)	10/01/2010			F	559 <u>(2)</u>		\$ 7.13	60,656	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
WARD JONATHAN W 6551 PARK OF COMMER BOCA RATON, FL 33487			Pres., Cross Country Staffing					
Signatures								
/s/ Jonathan W. Ward	10/12/2010							

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) This amended Form 4 is being filed to properly report the vesting of restricted stock on October 1, 2010.
- (2) The shares were withheld to satisfy Mr. Ward's tax withholding obligation for restricted stock which vested on October 1, 2010.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.