FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL
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l	hours per response:	0.5

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

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1. Name and Address of Reporting Person*  WESTFALL CAROL D						2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC CCRN										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify							
(Last) (First) (Middle) 501 LAKE AVENUE							3. Date of Earliest Transaction (Month/Day/Year) 08/17/2007											X Officer (give title Other (specify below)  President, Cejka Search					
(Street) ST. LOUIS MO 63119					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)													Person										
		Tab	le I - No	n-Deriv	vative	e Se	curit	ies Ad	cqu	ıired, [	Disp	osed c	of, or	Ber	nefici	ally	Owned	i					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution (y/Year) if any			cution Date,		Transaction   Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amou Securition Benefici Owned I Reporte	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount		(A) or (D)	Price	•	Transac (Instr. 3	tion(s)			(Instr. 4)		
Common	Stock		7/2007	2007				F		1,578	3	D	\$18.44		13,260		D						
Common Stock 08/17/2							2007			M		2,503		A	\$11	1.62 15		5,763		D			
		7	able II -									sed of onverti					wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactior Code (Instr. 8)					Date Exe piration I onth/Day	Date	Amount of		Securit	Di Si (li	B. Price of Derivative Gecurity Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Da Ex	ite ercisable		xpiration ate	Title		Amour or Number of Shares	r							
Employee Stock Option (Right to Buy)	\$11.62	08/17/2007			M			2,503		(1)	12	2/16/2009	Com		2,503	3	\$0	3,946 <sup>(2</sup>	2)	D			

## Explanation of Responses:

- 1. The options exercised are fully vested.
- $2.\ In\ addition,\ Ms.\ Westfall\ has\ 25,269\ options\ to\ purchase\ Common\ Stock\ of\ the\ Company\ with\ different\ exercise\ prices\ from\ the\ options\ reported\ in\ Table\ II$

## Remarks:

/s/ Carol Westfall 08/21/2007

\*\* 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.