FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
l	OMB Number:	3235-0287				
l	Estimated average burde	en				
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

1. Name and Ginter Ja (Last) 6551 PAR	2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC [CCRN] 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2010										Directo Officer below)	ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner Officer (give title Other (specify below) Pres., Med. Doctor Assoc., LLC								
(Street) BOCA RA	ATON FL (Sta		If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benefice									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
1. Title of Security (Instr. 3) 2. Tran Date (Month						2/ Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			(A) or	5. Amour Securitie Beneficia Owned F	s ally following	Form (D) o	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(1)	A) or D)	Price	Transaction(s) (Instr. 3 and 4)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Common S	tock			06/01	L/2010				A		5,000)	A	\$ <mark>0</mark>	9,3	380	D			
Common S	tock			06/01	L/ <mark>2010</mark>				F		355(1))	D	\$8.09	9,0	025				
		Та									osed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date, Transa Code (of E		Expiratio	6. Date Exercisi Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	0 0	Amount or Number of Shares						
Stock Appreciation	\$8.09	06/01/2010			A		5,000		(2)	-	06/01/2017	Comr		5,000	\$0	15,00	0	D		

Explanation of Responses:

- 1. The shares were withheld to satisfy Mr. Ginter's tax reporting obligation for restricted stock which vested on June 1, 2010.
- 2. The stock appreciation rights vest in four equal annual installments beginning on June 1, 2011.

Remarks:

/s/ James Ginter

06/02/2010

** 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.