FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasilington,	D.O.	20070

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
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

	otion 1(b).			1 1100							npany Act o			-						
1. Name and Address of Reporting Person* GLAZER CAPITAL, LLC					2. Issuer Name and Ticker or Trading Symbol Amplitude Healthcare Acquisition Corp [AMHC]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
							Date of Earliest Transaction (Month/Day/Year) 0/08/2020									v)		below)		
(Street) NEW YORK NY 10019						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	Form filed by One Reporting Person					
(City)	(State)	(Zip)												1 0130	, , , , , , , , , , , , , , , , , , ,				
		Та	ble I - No	n-Deriva	ative S	ecu	ırities	Acq	uired,	Dis	posed of	, or I	3ene	eficially	/ Own	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				uired ((Instr. :	(A) or 3, 4 and	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
										v	Amount	ount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock				09/08/	/2020		S		1	I	0	\$9.99	9 1,116,732		I		See Footnote 1. ⁽¹⁾			
			Table II -								osed of, o				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	onversion r Exercise rice of erivative		emed ion Date, /Day/Year)	4. Transac	4. Transaction Code (Instr.		5. Number of		6. Date Exercisa Expiration Date (Month/Day/Year		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. F Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: ly Direct (or Indir (I) (Inst	Ownership	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	nber						
		of Reporting Per												•					•	
(Last) 250 WE SUITE 3	ST 55TH 80A	(First) STREET	(Mi	ddle)																
(Street)	ORK	NY	100	019																
(City)		(State)	(Zip))																
1. Name a	nd Address	of Reporting Per	·son*																	

Explanation of Responses:

GLAZER PAUL J

250 WEST 55TH ST

(First)

NY

(State)

(Last)

(Street) **NEW YORK**

(City)

SUITE 30A

(Middle)

10019

(Zip)

Date

^{1.} The securities reported herein are held by certain funds and accounts to which Glazer Capital, LLC, a Delaware limited liability company, serves as investment manager. Mr. Paul J. Glazer serves as the Managing Member of Glazer Capital, LLC. Each of Glazer Capital, LLC and Mr. Paul J. Glazer disclaims beneficial ownership of the securities reported herein except to the extent of such Reporting Person's pecuniary interest therein.

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.