LOMBARDI JOHN R Form 4 April 16, 2003

		OMB APPROVAL			
		OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response0.5			
UNITED STATES SECUR Washi	ITIES AND EXCHA				
	FORM 4				
STATEMENT OF CHAN	GES IN BENEFICI	AL OWNERSHIP			
Filed pursuant to Section 16(a) Section 17(a) of the Public Section 30(h) of the	Utility Holding Investment Com	g Company Act of 1935 or mpany Act of 1940 on 16. Form 4 or Form 5			
obligations may continue. See	instruction i(c	)) •			
(Print of Type Responses)					
1. Name and Address of Reporting Pe	rson*				
Lombardi	John	R.			
(Last)	(First)	(Middle)			
3100 AMS Boulevard					
	(Street)				
Green Bay	WI	54313			
(City)	(State)	(Zip)			
2. Issuer Name and Ticker or Trad					
American Medical Security Grou					
3. I.R.S. Identification Number of					
4. Statement for Month/Day/Year					
April 14, 2003					
5. If Amendment, Date of Original (					

6. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

_  Director  x  Officer (give	title below)		10% Owner Other (speci	fy below)		
Executive Vice Pre	sident, Chief	Financial Offi	icer & Treasur	er		
7. Individual or Joint/	Group Filing (	 Check Applicab	ole line)		_	
x  Form Filed by					_	
Table I No	on-Derivative				=	
	2.	2A. Deemed Exec-		4. Securities Acquisposed of (Disposed of (Disposed of (Instr. 3, 4 and 1997))	)	(A) or
1. Title of Security (Instr. 3)	Date	-	(Instr. 8)  Code V	11110 0110	(A) or (D)	Price
					=====	

FORM 4 (continued)

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Derivative Security	ative	3. Trans- action Date (mm/dd/ yy)	ion Date if any	4. Trans- action Code (Instr. 8) Code V			Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
										Amount
					4 and  (A)	5)  (D)	Date Exer- cisable		Title	Number of Shares
Employee Stock Option (Right to Bu	l	4/14/200	)3	A	75 <b>,</b> 00	00	(1)	4/13/15	Common Stock	75,000
Explanation	of Respo	nses:								
(1) Option v	ests in	four (4)	equal anr	nual insta	allments	s beginr	ning 4/14/	04.		
/s/ J R Lombardi						5/2003				
**Signature of Reporting Person					Date					

John R. Lombardi

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.

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