Alexander Kent Form 3 September 09, 2010

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Alexander Kent			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [MDRX]						
(Last)	(First)	(Middle)	09/07/2010	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Origina Filed(Month/Day/Year)			
222 MERCH. PLAZA, SUI		MART								
(Street) CHICAGO, IL 60654				Director 10% OwnerX_ Officer Other (give title below) (specify below) Exec. VP, General Counsel		ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - N	Non-Derivat	tive Securiti	es Be	s Beneficially Owned			
1.Title of Securi (Instr. 4)	ty		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr	*			
No securities	beneficial	ly owned.	0		D	Â				
Reminder: Repor	•	te line for ea	ch class of securities benefic	ially S	EC 1473 (7-02)				
	Persor inform require	ation conta ed to respo	oond to the collection of ained in this form are not nd unless the form displ MB control number.	t						

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title		•	

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Date Expiration Exercisable Date

Amount or Security Number of Shares

Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer

Other

Alexander Kent

222 MERCHANDISE MART PLAZA, SUITE 2024 CHICAGO, ILÂ 60654

Â

Â Exec. VP, General Counsel Â

Signatures

/s/ Kathie Kittner by power of attorney for Kent Alexander

09/09/2010

**Signature of Reporting Person

Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(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).

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Remarks:

Exhibit List

Exhibit 24 - Power of Attorney

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.

Reporting Owners 2