FORM 4

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

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person Ginocchio Paul				2. Issuer Name and Ticker or Trading Symbol Augmedix, Inc. [AUGX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O AUGMEDIX, INC., 111 SUTTER STREET, SUITE 1300				3. Date of Earliest Transaction (Month/Day/Year) 06/07/2021						X_Office	er (give title bel CHIEF F	ow) INANCIAL	Other (specify OFFICER	pelow)		
(Street) SAN FRANCISCO, CA 94104			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)			(Instr. 8)		(A) or Disposed of		of (D)	Beneficia	t of Securities lly Owned Following Transaction(s)		Ownership of Form:	7. Nature of Indirect Beneficial Ownership		
				(Month/Day/Year)		Cod	e	V Amo	unt	(A) or (D)	Price	(mstr. 5 a	, and 4)		or Indirect (I) (Instr. 4)	
Common	Stock		06/07/2021			P		10,0	000	A	\$ 5	31,956			D	
Common Stock 06/08/2021		06/08/2021			P		2,04	4		\$ 5.5	34,000			D		
Reminder:	Report on a s	separate line fo		Derivative S	ecuriti	ies Acqu	P co th	ersons vontained ne form d	vho in t disp d of,	his for lays a or Ben	m are curre eficial	not requesting ntly valid	OMB con	ormation spond unle trol numbe	ss	1474 (9-02)
Derivative Conversion I		3. Transaction Date (Month/Day/Year) 3A. Deemed Execution I any (Month/Day		Code (Instr. 8) D Sc A (A D of (I		5. 6. Da and I		5. Date Ex and Expira Month/Da	ate Exercisable Expiration Date nth/Day/Year)		7. T Ame Und Secu (Ins: 4)	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownersh (Instr. 4)
				Code	V	(A) (I	F	Exercisabl		ate	Title	of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Ginocchio Paul C/O AUGMEDIX, INC. 111 SUTTER STREET, SUITE 1300 SAN FRANCISCO, CA 94104			CHIEF FINANCIAL OFFICER				

Signatures

/s/ Paul Ginocchio	06/09/2021	
**Signature of Reporting Person	Date	

Explanation of Responses:

- * 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.

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.