FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OMB API	PROVAL
OMB Number:	3235-0287
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer						
Leite Etalvina						DocGo Inc. [DCGO]							(Che	(Check all applicable)			.,			
Z TATO Z TOTAL TIME													V	4			10% Ov			
(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								1	Officer (give title Other (spec below) below)				specity		
` '	CGO INC.	12/13/2024																		
		REET, FLOOR (5																	
	1 33111 31	KLE1, FLOOK	,		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)													1 '	.ine) ✓ Form filed by One Reporting Person						
NEW YO	ORK N	Y 1	0001											Form filed by More than One Reporting						
															Person					
(City)	(St	ate) (2	<u>Z</u> ip)																	
		Table	I - Noi	n-Deriva	tive S	ecur	ities Acq	uired.	Dis	posed of	f. o	r Bene	ficial	v Own	ed					
1. Title of Security (Instr. 3) 2. Transact Date				th/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		ction Instr.	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Securi Benefi Owner	cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount		(A) or (D)	Price		ted action(s) 3 and 4)			(Instr. 4)		
Common	Stock			12/13/2	024 A 34,965 ⁽¹⁾ A		Α	\$0	67,911		D									
Common Stock 12/17/2				024			s 16,500 ⁽²⁾ D		D	\$4.34	5	51,411		D						
		Tal					ies Acqu /arrants,							Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Di Sc (Is	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst	Ownership	11. Nature of Indirec Beneficia Ownershi (Instr. 4)		
	1 1														1			I		

Explanation of Responses:

1. Represents restricted stock units ("RSUs") granted pursuant to the Issuer's 2021 Stock Incentive Plan (the "Plan") that will vest on December 13, 2025, subject to the terms of the Plan. Each RSU represents the right to receive, upon vesting, one share of Common Stock, subject to the terms of the Plan.

(D)

2. The transaction reported reflects the disposition of Common Stock to cover taxes due in connection with the vesting of RSUs. The RSUs were granted to the Reporting Person on December 12, 2023.

Exercisable

Date

Remarks:

/s/ Jerilyn Laskie, as Attorneyin-Fact for Etalvina Leite 12/17/2024

or Number

Shares

Title

** 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).

Code

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.