#### OMB APPROVAL

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

|OMB NUMBER: |EXPIRES: | JUNE 30, 2012 |ESTIMATED AVERAGE |BURDEN HOURS |PER RESPONSE ...11

SCHEDULE 13G

NUMBER OF

SHARES BENEFICIALLY

Under the Securities Exchange Act of 1934 (Amendment No. \_ )\* AVISTA HEALTHCARE PUBLIC ACQUISITION CORP. (AHPAU) (Name of Issuer) Units (Title of Class of Securities) G0726L109 (CUSIP Number) December 31, 2016 (Date of Event Which Requires Filing of this Statement) Check the appropriate box to designate the rule pursuant to which this Schedule is filed: [X] Rule 13d-1(b) [ ] Rule 13d-1(c) [ ] Rule 13d-1(d) \*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page. The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes). CUSIP No. G0726L109 SCHEDULE 13G (1) NAMES OF REPORTING PERSONS I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (entities only) Alyeska Investment Group, L.P. (2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions): (a) [ ] (b) [ ] (3) SEC USE ONLY (4) CITIZENSHIP OR PLACE OF ORGANIZATION Delaware (5) SOLE VOTING POWER

0

(6) SHARED VOTING POWER

OWNED BY			2,100,000		
PERSON WIT		(7)	SOLE DISPOSITIVE POWER 0		
		(8)	SHARED DISPOSITIVE POWER 2,100,000		
(9)	AGGREGATE AMOUNT BENEFICI	ALLY	OWNED BY EACH REPORTING PERSON		
	2,100,000				
(10)	(See Instructions)		DUNT IN ROW (9) EXCLUDES CERTAIN SHARES		
(11)	PERCENT OF CLASS REPRESEN 7.0%				
(12)	TYPE OF REPORTING PERSON IA	(See	Instructions)		
CUSIP No.	G0726L109		SCHEDULE 13G		
(1)	NAMES OF REPORTING PERSONS I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (entities only)				
	Alyeska Fund GP, LLC				
(2)			A MEMBER OF A GROUP (See Instructions): (a) [ ] (b) [ ]		
(3)	SEC USE ONLY				
(4)	CITIZENSHIP OR PLACE OF O	DCVN.	rzatton		
• •		INOAN.	IZATION		
, ,	Delaware	MOAN.	LZATION		
NUMBER OF			SOLE VOTING POWER		
SHARES BENEFICIAL OWNED BY	Delaware 	(5)	SHARED VOTING POWER 2,100,000		
SHARES BENEFICIAL	Delaware  LLY RTING	(5) \$	SHARED VOTING POWER 2,100,000  SOLE DISPOSITIVE POWER		
SHARES BENEFICIAL OWNED BY EACH REPOR	Delaware  LLY RTING	(6)	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER		
SHARES BENEFICIAI OWNED BY EACH REPOF PERSON WIT	Delaware LLY RTING TH	(5) \$ (6) (7) (8)	SHARED VOTING POWER 2,100,000  SOLE DISPOSITIVE POWER 0  SHARED DISPOSITIVE POWER		
SHARES BENEFICIAI OWNED BY EACH REPOF PERSON WIT	Delaware  LLY  RTING TH  AGGREGATE AMOUNT BENEFICE  2,100,000	(5) \$ (6) (7) (8)	SHARED VOTING POWER 2,100,000  SOLE DISPOSITIVE POWER 0  SHARED DISPOSITIVE POWER 2,100,000  OWNED BY EACH REPORTING PERSON		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING TH  AGGREGATE AMOUNT BENEFICI 2,100,000	(5) (6) (7) (8) (ALLY	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER  0  SHARED DISPOSITIVE POWER  2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING TH  AGGREGATE AMOUNT BENEFICE  2,100,000  CHECK BOX IF THE AGGREGAT (See Instructions)  PERCENT OF CLASS REPRESEN 7.0%	(5) \$ (6) (7) (8) (ALLY	SHARED VOTING POWER 2,100,000  SOLE DISPOSITIVE POWER 0  SHARED DISPOSITIVE POWER 2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES [ ]  BY AMOUNT IN ROW (9)		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING TH  AGGREGATE AMOUNT BENEFICE  2,100,000  CHECK BOX IF THE AGGREGAT (See Instructions)  PERCENT OF CLASS REPRESEN 7.0%  TYPE OF REPORTING PERSON 00	(5) \$ (6) (7) (8) (EALLY) (See	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER  0  SHARED DISPOSITIVE POWER  2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES  [ ]  BY AMOUNT IN ROW (9)		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING TH  AGGREGATE AMOUNT BENEFICE  2,100,000  CHECK BOX IF THE AGGREGAT (See Instructions)  PERCENT OF CLASS REPRESEN 7.0%  TYPE OF REPORTING PERSON 00	(5) \$ (6) (7) (8) (EALLY) (See	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER  0  SHARED DISPOSITIVE POWER  2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES  [ ]  BY AMOUNT IN ROW (9)		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING TH  AGGREGATE AMOUNT BENEFICE  2,100,000  CHECK BOX IF THE AGGREGAT (See Instructions)  PERCENT OF CLASS REPRESEN 7.0%  TYPE OF REPORTING PERSON 00	(5) \$ (6) (7) (8) EALLY (See	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER  0  SHARED DISPOSITIVE POWER  2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES  [ ]  BY AMOUNT IN ROW (9)  Instructions)		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING IH  AGGREGATE AMOUNT BENEFICI  2,100,000  CHECK BOX IF THE AGGREGAT (See Instructions)  PERCENT OF CLASS REPRESEN 7.0%  TYPE OF REPORTING PERSON 00  G0726L109  NAMES OF REPORTING PERSON	(5) \$ (6) (7) (8) (ALLY (See	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER  0  SHARED DISPOSITIVE POWER  2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES  [ ]  BY AMOUNT IN ROW (9)  Instructions)		
SHARES BENEFICIAL OWNED BY EACH REPOR PERSON WIT	Delaware  LLY  RTING IH  AGGREGATE AMOUNT BENEFICI  2,100,000  CHECK BOX IF THE AGGREGAT (See Instructions)  PERCENT OF CLASS REPRESEN 7.0%  TYPE OF REPORTING PERSON 00  G0726L109  NAMES OF REPORTING PERSON	(5) \$ (6) (7) (8) (ALLY (See	SOLE VOTING POWER  0  SHARED VOTING POWER  2,100,000  SOLE DISPOSITIVE POWER  0  SHARED DISPOSITIVE POWER  2,100,000  OWNED BY EACH REPORTING PERSON  DUNT IN ROW (9) EXCLUDES CERTAIN SHARES  [ ]  BY AMOUNT IN ROW (9)  Instructions)		

(3)	SEC USE ONLY			
(4)	CITIZENSHIP OR PLACE OF ORGANIZATION			
	Delaware			
		(5) SOLE VOTING POWER		
NUMBER OF	:	0		
HARES	J.I.V	(6) CHAPER VOTING DOUED		
SENEFICIA WNED BY	ALL T	(6) SHARED VOTING POWER 2,100,000		
ACH REPO				
PERSON WI	.IH	(7) SOLE DISPOSITIVE POWER 0		
		(8) SHARED DISPOSITIVE POWER 2,100,000		
(9)	AGGREGATE AMOUNT BEN	 NEFICIALLY OWNED BY EACH REPORTING PERSON		
(-)	2,100,000			
(10)	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions)			
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 7.0%			
(12)	TYPE OF REPORTING PE	ERSON (See Instructions)		
CUSIP No.	G0726L109	SCHEDULE 13G		
USIP No. (1)	NAMES OF REPORTING F			
(1)	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIA	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [ ] (b) [ ]		
(1)	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIA	PERSONS ON NOS. OF ABOVE PERSONS (entities only) TE BOX IF A MEMBER OF A GROUP (See Instructions): (a) [ ]		
(1)	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh CHECK THE APPROPRIA	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) []  (b) []  E OF ORGANIZATION  erica		
(1) (2) (3) (4)	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE  SEC USE ONLY  CITIZENSHIP OR PLACE United States of American	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [] (b) []  E OF ORGANIZATION erica		
(1) (2) (3) (4) (4) UMBER OF SHARES BENEFICIA	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE  SEC USE ONLY  CITIZENSHIP OR PLACE United States of American	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [] (b) []  E OF ORGANIZATION erica  (5) SOLE VOTING POWER		
(1) (2) (3) (4) UMBER OF SHARES BENEFICIA	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE  SEC USE ONLY  CITIZENSHIP OR PLACE United States of American	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [] (b) []  E OF ORGANIZATION erica  (5) SOLE VOTING POWER  0  (6) SHARED VOTING POWER  2,100,000  (7) SOLE DISPOSITIVE POWER		
(1)  (2)  (3)  (4)  UMBER OF HARES ENEFICIA WNED BY ACH REPO	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE  SEC USE ONLY  CITIZENSHIP OR PLACE United States of American	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [] (b) []  E OF ORGANIZATION erica  (5) SOLE VOTING POWER  0  (6) SHARED VOTING POWER  2,100,000  (7) SOLE DISPOSITIVE POWER		
(1)  (2)  (3)  (4)  UMBER OF HARES ENEFICIA WNED BY ACH REPO	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE SEC USE ONLY  CITIZENSHIP OR PLACE United States of American States State	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [] (b) []  E OF ORGANIZATION erica  (5) SOLE VOTING POWER  0  (6) SHARED VOTING POWER  2,100,000  (7) SOLE DISPOSITIVE POWER  0  (8) SHARED DISPOSITIVE POWER		
(1)  (2)  (3)  (4)  UMBER OF HARES ENEFICIA WNED BY ACH REPOERSON WI	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE SEC USE ONLY  CITIZENSHIP OR PLACE United States of American States State	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) [] (b) []  E OF ORGANIZATION erica  (5) SOLE VOTING POWER 0  (6) SHARED VOTING POWER 2,100,000  (7) SOLE DISPOSITIVE POWER 0  (8) SHARED DISPOSITIVE POWER 2,100,000  NEFICIALLY OWNED BY EACH REPORTING PERSON		
(1) (2) (3) (4) (4) UMBER OF SHARES BENEFICIA DWNED BY EACH REPORTED BY EA	NAMES OF REPORTING FIR.S. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE SEC USE ONLY  CITIZENSHIP OR PLACE United States of American American American American Aggregate Amount Benefit 2,100,000	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) []  (b) []  E OF ORGANIZATION erica  (5) SOLE VOTING POWER  0  (6) SHARED VOTING POWER  2,100,000  (7) SOLE DISPOSITIVE POWER  0  (8) SHARED DISPOSITIVE POWER  2,100,000		
(1) (2) (3) (4) (4) (4) (5) (4) (5) (4) (6) (6) (7) (7) (8) (9)	NAMES OF REPORTING FIRES. IDENTIFICATION Anand Parekh  CHECK THE APPROPRIATE SEC USE ONLY  CITIZENSHIP OR PLACE United States of American States o	PERSONS ON NOS. OF ABOVE PERSONS (entities only)  TE BOX IF A MEMBER OF A GROUP (See Instructions):  (a) []  (b) []  E OF ORGANIZATION  BETICA  (5) SOLE VOTING POWER  0  (6) SHARED VOTING POWER  2,100,000  (7) SOLE DISPOSITIVE POWER  0  (8) SHARED DISPOSITIVE POWER  2,100,000  NEFICIALLY OWNED BY EACH REPORTING PERSON  GREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES		

Item 1(a). Name of Issuer:
AVISTA HEALTHCARE PUBLIC ACQUISITION CORP.

Item 1(b). Address of Issuer's Principal Executive Offices: 65 East 55TH Street, 18TH Floor
New York NY 10022

Item 2(a). Name of Persons Filing:

- (i) Alyeska Investment Group, L.P.
- (ii) Alyeska Fund GP, LLC
- (iii) Alyeska Fund 2 GP, LLC
- (iv) Anand Parekh

Item 2(b). Address of Principal Business Office or, if None, Residence:

- (i) 77 West Wacker Drive, 7th Floor Chicago, IL 60601
- (ii) 77 West Wacker Drive, 7th Floor Chicago, IL 60601
- (iii) 77 West Wacker Drive, 7th Floor Chicago, IL 60601
- (iv) 77 West Wacker Drive, 7th Floor Chicago, IL 60601

Item 2(c). Citizenship:

- (i) Alyeska Investment Group, L.P.- Delaware
- (ii) Alyeska Fund GP, LLC- Delaware
- (iii) Alyeska Fund 2 GP, LLC- Delaware
- (iv) Anand Parekh- United States of America

Item 2(d). Title of Class of Securities: Units

Item 2(e). CUSIP Number: G0726L109

- Item 3. If This Statement is Filed Pursuant to Sections 240.13d-1(b) or 240.13d-2(b), Check Whether the Person Filing is a:
- (a) Alyeska Investment Group, L.P., a limited partnership organized under the laws of the State of Delaware, is a registered investment adviser under Section 203 of the Investment Advisers Act of 1940, as amended, and is reporting in accordance with 240.13d-1(b)(1)(ii)(E).
- (b) Alyeska Fund GP, LLC, a limited liability company organized under the laws of the State of Delaware, serves as the General Partner and control person of Alyeska Master Fund, L.P., and is reporting in accordance with

240.13d-1(b)(1)(ii)(G).

- (c) Alyeska Fund 2 GP, LLC, a limited liability company organized under the laws of the State of Delaware, serves as the General Partner and control person of Alyeska Master Fund 2, L.P., and is reporting in accordance with 240.13d-1(b)(1)(ii)(G).
- (d) Anand Parekh is the Chief Executive Officer and control person of Alyeska Investment Group, L.P., and is reporting in accordance with 240.13d-1(b)(1)(ii)(G).

### Item 4. Ownership.

Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

- (a) Amount beneficially owned: Please refer to items 5-9 of the cover pages attached hereto
- (b) Percent of class: Please refer to item 11 of the cover pages attached hereto
- (c) Number of shares as to which the person has: Please refer to items 5-8 of the cover pages attached hereto
- Item 5. Ownership of Five Percent or Less of a Class.
   Not Applicable
- Item 6. Ownership of More than Five Percent on Behalf of Another Person.
  Not Applicable
- Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company or Controlling Person. Not Applicable
- Item 8. Identification and Classification of Members of the Group.
  Not Applicable
- Item 9. Notice of Dissolution of Group
   Not Applicable

## Item 10. Certification

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

CUSIP NO. G0726L109 SCHEDULE 13G

#### **SIGNATURES**

After reasonable inquiry and to the best of our knowledge and belief, the undersigned certify that the information set forth in this statement is true, complete and correct.

Dated: February 14, 2017

Alyeska Investment Group, L.P.

By: /s/ Jason Bragg Name: Jason Bragg Title: Chief Financial Officer and Chief Compliance Officer Alyeska Fund GP, LLC By: /s/ Jason Bragg \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Name: Jason Bragg Title: Chief Financial Officer and Chief Compliance Officer Alyeska Fund 2 GP, LLC By: /s/ Jason Bragg Name: Jason Bragg Title: Chief Financial Officer and Chief Compliance Officer Anand Parekh By: /s/ Anand Parekh Name: Anand Parekh Individually CUSIP NO. G0726L109 SCHEDULE 13G Exhibit A Agreement The undersigned agree that the statement to which this exhibit is appended is filed on behalf of each of them. Dated: February 14, 2017 Alyeska Investment Group, L.P. By: /s/ Jason Bragg -----Name: Jason Bragg Title: Chief Financial Officer and Chief Compliance Officer Alyeska Fund GP, LLC By: /s/ Jason Bragg -----Name: Jason Bragg Title: Chief Financial Officer and Chief Compliance Officer Alyeska Fund 2 GP, LLC By: /s/ Jason Bragg Name: Jason Bragg

Title: Chief Financial Officer and Chief Compliance Officer

Anand Parekh

By: /s/ Anand Parekh

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Name: Anand Parekh

Individually