FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | |
|---|------------------------|-----------|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | |
| l | Estimated average burd | en | | | | |
| l | hours per response: | 0.5 | | | | |

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

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

| 1. Name and Address of Reporting Person* TURNER ANDREW L | | | | | | | 2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM] | | | | | | | | | all app Dired | olicable) ctor er (give title | g Perso | Person(s) to Issuer 10% Owner Other (specify below) | |
|--|--|--|---|---------|-----------------------------|--|---|--------------------------------------|--|--------|--|---|--|--------------|------------------------------------|-----------------------|---|------------------------------------|---|--|
| (Last) (First) (Middle) 2801 WESTERN AVE. PENTHOUSE #2 | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/31/2007 | | | | | | | | | BCIO | ··, | | Below | |
| (Street) SEATTLE WA 98121 (City) (State) (Zip) | | | | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | i. Individ ine) X | , | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | | | Execution Date, | | Transaction Disposed Of Code (Instr. | | | es Acquired (A) o Of (D) (Instr. 3, 4 a | | | and 5) Secui | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A (D |) or) | Price | - 1. | Transaction(s) (Instr. 3 and 4) | | | | (111311.4) | |
| Common Stock \$.01 Par Value 08/31/2 | | | | | | | 2007 | | P | | 3,820 | | A | \$3.0 | 3.0242 | | 12,920 | |) | |
| Common Stock \$.01 Par Value 08/31/2 | | | | | | | | | | | 2,000 | | A | \$3.0242 | | 2,000 | | | I | By Spouse |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/D | n Date, | Date, Transaction Code (Ins | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | nstr. 3 | | ivative urity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ow For Dire or I (I) (| nership m: ect (D) ndirect Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amount or Number of tle Shares | | | | | | | |

Explanation of Responses:

Remarks:

Donald Vick, by power of atty. 09/04/2007

** 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).

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.