FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-028							
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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).

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
VONDERBRINK EDWARD						INC. [STRM]									X	Direc				wner			
(Last) (First) (Middle) 5536 JESSUP ROAD					3. Date of Earliest Transaction (Month/Day/Year) 11/30/2007											Officer (give title below)		Other (spe below)		specify			
(Street) CINCINNATI OH 45247					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					on .			
(City) (State) (Zip)																Person							
		Tab	le I - Noi	n-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed c	f, or	Ben	eficia	illy	Owne	ed						
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar)	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Dispo		n Dispose	rities Acquired (A ed Of (D) (Instr. 3,				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	· v	Amount		(A) or (D) Pri		Transact		ction(s)			(1130.4)			
Common Stock \$.01 Par Value 11/30				/2007	7					1,000	0 A		\$2	2.5 11,00		1,000	D						
		Та	able II - I (osed of, onvertib				/ Ov	vned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date, C	4. Transaction Code (Instr B)				6. Date Expirati (Month/	on Da Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4) Amou or Numb of Title Share		ount nber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

Remarks:

Donald Vick, by power of atty. 11/30/2007

** Signature of Reporting Person Da

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.