FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average b	ourden						

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

hours per response: 0.5

1. Name and Address of Reporting Person* LOMBARDO ERIC					ST	2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]									neck all app Dired	ctor	ig Perso	10% C	10% Owner	
(Last) (First) (Middle) 7173 ROYALGREEN DR.					3. Date of Earliest Transaction (Month/Day/Year) 09/13/2006											Officer (give title below)		Other below)	(specify	
(Street) CINCINNATI OH 45244 (City) (State) (Zip)														Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					2A. Deemed Execution Date if any (Month/Day/Yea			n Date,	3. Transaction Code (Instr. 8) 8 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)						d Securi Benefi Owned	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	Amount (A		Price		action(s) 3 and 4)			(Instr. 4)	
Common Stock					09/13/2006				S		1,250)	D \$5.5		5 1,8	1,819,255		D		
	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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Derivati		rative rities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		er. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	nership rm: ect (D) Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Cod					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Num of Shar							

Explanation of Responses:

Eric S. Lombardo

09/15/2006

** 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.