FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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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

1. Name and Address of Reporting Person* VICK DONALD E JR					ST	2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Owner Officer (give title Other (spe			Owner
(Last) (First) (Middle) 3448 WOODSIDE DR.				3. Date of Earliest Transaction (Month/Day/Year) 12/05/2006								-	X Officer (give title Officer (specify below) below) Assistant Treasurer					
(Street) FAIRFIELD OH 45242 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. 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																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					Execution Date		n Date,	Transaction Disposed Of Code (Instr. 5)			ties Acquired (A) d Of (D) (Instr. 3, 4			nd Sec Ben Owr	mount of urities eficially eed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount (A) (D)		A) or O)	Price	Tran	orted saction(s) r. 3 and 4)		(Instr. 4)
Common Stock \$.01 Par Value 12/05/					5/2006	/2006		S		5,000	D \$5		\$5 .	45	3,349	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) 2. Conversion or Exercise (Instr. 3) Price of Derivative Security 3. Transaction Date (Month/Day/Year) if any (Month/Day/			Date, Transaction Code (Instr.		n of E		Expiration	5. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nur of Sha	nber res				

Explanation of Responses:

Remarks:

Donald E. Vick, Jr.

12/05/2006

** 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.