Edgar Filing: Richard Donald Leach - Form 4

Richard Don Form 4	hald Leach											
December 3	0, 2011											
EODM A										OMB APPROVAL		
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE (Washington, D.C. 20549						IGE C	COMMISSION	OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 c Form 5	ger STATH 16. or	EMENT O		SECU	Expires:January 31 2009Estimated average burden hours per response0.9							
obligatio may com <i>See</i> Instr 1(b).	tinue. Section 1 uction	7(a) of the		ility H	old	ing Com	pany	Act of	e Act of 1934, f 1935 or Section 40	n		
(Print or Type]	Responses)											
1. Name and Address of Reporting Person <u>*</u> Richard Donald Leach			2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH						 Relationship of Reporting Person(s) to Issuer (Check all applicable) 			
<u> </u>						C. [STRN	/1]					
(Last) (First) (Middle) C/O STREAMLINE HEALTH, 10200 ALLIANCE ROAD, SUITE 200			3. Date of Earliest Transaction (Month/Day/Year) 12/30/2011						Director 10% Owner X Officer (give title Other (specify below) Chief Marketing Officer			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CINCINNA	ATI, OH 45242								Form filed by N Person			
(City)	(State)	(Zip)	Tabl	e I - Noi	n-De	erivative S	ecurit	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med	3.	ctio 8)	4. Securit n(A) or Dis (Instr. 3, 4)	ies Ac sposed	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common				2.540			(2)	\$				
Stock \$.01 Par Value	12/30/2011	12/30/2	2011	А		15,151	А	۵ 1.65	46,211	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	of		ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Richard Donald Leach C/O STREAMLINE HEALTH 10200 ALLIANCE ROAD, SUITE 200 CINCINNATI, OH 45242			Chief Marketing Officer					
Signatures								
Stephen H. Murdock, by Power of Attorney		12/30/2011						
**Signature of Reporting Person		Date						
Evaluation of Deenen								

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.