FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

Print or Type Responses)												
1. Name and Address of Reporting Person *- AULT MILTON C III			2. Issuer Name and Ticker or Trading Symbol DIGICORP [DGCO.OB]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner			
100 WILSHIRE FLOOR	3. Date of Earliest Transaction (Month/Day/Year) 07/22/2005						X_ Officer (give title Other (specify below) Chief Executive Officer					
SANTA MONIC	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 Form filed by More than One Reporting Person					
(City)	(State) (Zip	p)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							Owned		
(Month/Day/Year) any		eemed ion Date, if h/Day/Year)	Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership		
				Code	v	Amount	or	Price	(Instr. 3 and 4)	(I) (Instr. 4)		
Common Stock	07/22/2005			P		45,000	A	\$ 0.5254	3,052,527	Ι	See Footnotes (1) (2)	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.												
								SEC 1474 (9-02)				

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	Transaction	3A. Deemed	4.	5.		6. Date Exer	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Num	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Secu	rities			(Instr	r. 3 and		Owned	Security:	(Instr. 4)
	Security				Acqu	iired			4)			Following	Direct (D)	
					(A) c	or						Reported	or Indirect	
					Disp	osed						Transaction(s)	(I)	
					of (D)						(Instr. 4)	(Instr. 4)	
					(Inst	r. 3,							i	
					4, an	d 5)							i	
										Amount			i	
							~ .						i l	
							Date	Expiration Date	Title	Number			i l	
							Exercisable	Date		of			i	
				Code V	(A)	(D)				Shares				

Reporting Owners

Penarting Owner Name / Address	Relationships							
Reporting Owner Name / Address		tor 10% Owner Officer		Other				
AULT MILTON C III 100 WILSHIRE BLVD 15TH FLOOR SANTA MONICA, CA 90401	X	X	Chief Executive Officer					

Signatures

/s/ Milton "Todd" Ault	07/25/2005
**Signature of Reporting Person	Date

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).

 Represents securities held by certain private investment funds and individual accounts managed by Ault Glazer & Company Investment
- (1) Management LLC, for which the reporting person serves as Chief Investment Officer and managing member. These securities include 2,792,027 shares of the Issuer's common stock held by Patient Safety Technologies, Inc., for which the reporting person serves as Chairman and Chief Executive Officer.
- $\begin{tabular}{ll} \end{tabular} \begin{tabular}{ll} \end{tabular} \beg$

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.