FORM 4

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

OMB APPROVAL
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longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

response... et of 1934 or

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 Addres AULT MILTON	2. Issuer Na Symbol DIGICORI				ling		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner			
100 WILSHIRE	(Month/Day/	3. Date of Earliest Transaction (Month/Day/Year) 08/04/2005					X_ Officer (give title Other (specify below) 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) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code)	4. Securi Acquired Disposed (Instr. 3,	(A) or d of (D), 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	08/04/2005		P		5,000	A	\$ 0.4	3,072,527	I	See footnotes
Reminder: Report or directly or indirectly.	a separate line for ea	ch class of securitie	es benefic	Pe inf	rsons w ormatio	n cor resp	ntaine pond	nd to the collection ed in this form are r unless the form dis control number.	not	SEC 1474 (9-02)

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	Transaction	3A. Deemed	4.	5.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numl	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				Secur	rities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Acqu	ired			4)			Following	Direct (D)	
					(A) o	r						Reported	or Indirect	
					Dispo	osed						Transaction(s)	(I)	
					of (D)						(Instr. 4)	(Instr. 4)	
					(Instr	. 3,								
					4, and	15)								
										Amount				
							Date	Expiration Date	Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

Reporting Owners

Donouting Oromon Names / Address	Relationships							
Reporting Owner Name / Address		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 Ault	08/05/2005
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.
- $\begin{tabular}{ll} \end{tabular} \begin{tabular}{ll} \end{tabular} The reporting person disclaims beneficial ownership of these securities. \end{tabular}$

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.