### FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287
Estimated average

5. Relationship of Reporting Person(s) to

Amount

Number

Shares

Title

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*-AULT MILTON C III

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

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

2. Issuer Name and Ticker or Trading

AULI MILION	CIII		ymboi DIGICORP	[DGC	O.O	B]			(Ch	eck all applica	ible) 10% Owner			
	(First) (Middle) BLVD., SUITE 17	750 (N	. Date of Ear Month/Day/\(\frac{1}{30}\)		nsac	tion			Officer (give below)		Other (specify b	pelow)		
SANTA MONIC		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Applicable Line) _X_ Form filed by O Form filed by M						
(City)	(State) (Zip)		Table I - I	Non-Dei	rivat	ive Secur	rities	Acqui	ired, Disposed o		-			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any		3. Transac Code (Instr. 8	)	4. Securi Acquired Disposed (Instr. 3,	d (A) d of ( 4 and (A) or	D) d 5)	5. Amount of Securities Beneficially Ov Following Rep Transaction(s) (Instr. 3 and 4)	wned Form: Orted Direct or Ind	(D) Owner (Instr.	lirect icial ership		
Common Stock	11/30/2005			P	V	20,000		\$ 1	3,596,527	I	See Foot:	note		
Common Stock	11/30/2005			P		20,000	A	\$ 1	3,616,527	I	See Foot:	note		
Common Stock	11/30/2005			P		5,000	A	\$ 1	3,621,527	I	See Foots (1)	note		
Common Stock	11/30/2005			P		9,000	A	\$ 1	3,630,527	I	See Foot:	note		
Reminder: Report or directly or indirectly.	n a separate line for ea	ch class	s of securities	s benefic	, ·					- Ai e	oreo.	1474		
					inf re	ormatio	n co res	ntaine pond	nd to the colle ed in this form unless the for control numb	are not rm displays	(	1474 9-02)		
			ve Securities s, calls, war	-		•			eficially Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversi or Exerci Price of Derivative Security	ise (Month/Day/Year	Execu any	Deemed ution Date, it nth/Day/Year	Code		5. Number of Derival Securit Acquir (A) or Dispos of (D) (Instr. 4, and	er a (introduction) and (introdu	ınd Ex		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Date

Exercisable Date

Expiration

#### **Reporting Owners**

Donoutino Orano None / Adduses		Relationsh	ips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
AULT MILTON C III				
100 WILSHIRE BLVD.		Y		
SUITE 1750		Λ		

SANTA MONICA, C	A 90401				
				•	
Signatures					
			_		
/s/ Milton Ault		12/02/20	05		
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 Bodnar and Company Investment Management LLC, for which the reporting person serves as Chief Investment Officer and managing member. These securities
- (1) 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. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

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.