FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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Section obligat	this box if no lon 16. Form 4 or ions may continution 1(b).	onger subject to Form 5 nue. See	STA		-iled pi	ursua	nt to S	ection 16(a)) of the S	Securit	ies Exchange	e Act of 193		SHIP	Estima	ated ave	erage burder	0.5
Name and Address of Reporting Person* FORISH JOSEPH J					2.	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]								neck all applica Director	,			
(Last) (First) (Middle) 400 WOOD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 06/21/2012								helow)	give title Other (sp below) P, Human Resources		specify		
(Street) BRAINT		IA	02184			4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	state)	(Zip)															
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					sactio	tion 2A. Deemed Execution Date,		3. 4. Securities Disposed Of Code (Instr.			Acquired ((A) or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							(WOITHI/Day/Teal)		Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)	(,, ((Instr. 4)
Common	Stock			06/2	21/20	12			M		12,000(1)	+ ' '	\$48.1	- `	•		D	
Common	Stock			06/2	06/21/2012				S		12,000(1)	2,000 ⁽¹⁾ D		38 8,49	8,497(2)		D	
			Table II -								osed of, convertible			Owned				•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	n Date e (Month/Day/Year) it	3A. Deemed Execution Da if any (Month/Day/	ate,	4. Transa Code (8)		n Derivative		6. Date Exercise Expiration Date (Month/Day/Yea		e of Securit		ies g Security	Derivative Security	9. Number derivative Securitie Beneficia Owned Following Reported	e s ally g	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoun or Numbe of Shares		Transacti (Instr. 4)	ion(s)		
Non- Qualified Stock Option (right to buy)	\$48.195	06/21/2012			M			12,000 ⁽¹⁾	12/19/20	006 ⁽³⁾	12/19/2012	Common Stock	12,00	\$71.138	0.0		D	
Non- Qualified Stock Option (right to buy)	\$51.07								10/24/20	008 ⁽³⁾	10/24/2014	Common Stock	11,79	9	11,79	9	D	
Non- Qualified Stock Option (right to buy)	\$52.76								05/05/20	007 ⁽³⁾	05/05/2013	Common Stock	10,37	3	10,37	73	D	
Non- Qualified Stock Option (right to buy)	\$52.94								10/27/20	010 ⁽³⁾	10/27/2016	Common Stock	14,69		14,69	00	D	
Non- Qualified Stock Option (right to buy)	\$54.55								10/22/20	009 ⁽³⁾	10/22/2015	Common Stock	11,91	L	11,91	.1	D	

Non-Qualified Stock Option (right to buy) Explanation of Responses:

\$54.99

\$61.34

Non-Qualified Stock Option (right to buy)

2. Total includes Restricted Stock Awards and/or Restricted Stock Units that are subject to restrictions until vesting requirements are met. Grant was made under 2005 Long Term Incentive Compensation Plan.

10/27/2011⁽³⁾

10/25/2012⁽³⁾

Common Stock

Common Stock

15,388

15,370

15,388

15,370

D

D

10/27/2017

10/25/2018

3. Grant to reporting person of right to buy shares of common stock exercisable in annual increments of 25 percent beginning on the first anniversary of the date of grant.

By: Susan M. Hanlon For: Joseph J. Forish

** Signature of Reporting Person

06/22/2012

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.