3235-0287

7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial

Ownership (Instr. 4)

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SEC For											_			~						
	FORM	4	UNITE	521		5 51	-CUI			on, D.C. 2			NGE C		115	SION		OMB	APPRC	VAL
Section 16. Form 4 or Form 5 obligations may continue. See						NT OF CHANGES IN BENEFICIAL OWNERSHIP												OMB Number: 3235-02 Estimated average burden hours per response:		
1. Name and Address of Reporting Person*						or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]									5. Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Ow					
(Last) (First) (Middle) 400 WOOD ROAD						3. Date of Earliest Transaction (Month/Day/Year) 07/31/2008									Officer (give title Other (specify below) below)					
(Street) BRAINTREE MA 02184					_ 4.	 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicat Line) X Form filed by One Reporting Person Form filed by More than One Reporting 											on .			
(City)	(S	itate)	(Zip)													Person	1			
		Tat	ole I - Noi						cqu	-	Disp		-		-	Owned				7. Natur
1. Title of Security (Instr. 3) 2. Transa Date (Month/E						ear)	Execution Date,			Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) or str. 3, 4 au	4 and Securiti Benefic Owned		s ally ollowing	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
										Code \		Amount	(A) oi (D)	Price	e Reported Transaction((Instr. 3 and		ion(s)			(Instr. 4)
Common Stock 07/31						2008				Α		354	354 A S		01 641		1(1)		D	
			Table II -										or Ben ble secu			wned				
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. Transa Code 8)				Exp	Date Exercipiration D piration D ponth/Day/	ate		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		D	erivative ecurity nstr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	ve es ially ng d tion(s)	10. Ownershij Form: Direct (D) or Indirect (I) (Instr. 4	Benet Owne (Instr
					Code	v	(A)	(D)	Dat Exe	e ercisable		xpiration ate	Title	Amoun or Numbe of Shares	r					
Non- Qualified Stock Option	\$58.46	07/31/2008			A	v	5,664		07/3	31/2009 ⁽²⁾) 0'	7/31/2018	Common	5,664	t	\$0	5,66	54	D	

			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	of Shares				
Non- Qualified Stock Option (right to buy)	\$58.46	07/31/2008	A	v	5,664		07/31/2009 ⁽²⁾	07/31/2018	Common Stock	5,664	\$0	5,664	D	
Non- Qualified Stock Option (right to buy)	\$48.765						(3)	01/03/2016	Common Stock	20,000		20,000	D	
Non- Qualified Stock Option (right to buy)	\$49.92						08/01/2008 ⁽²⁾	08/01/2014	Common Stock	4,592		4,592	D	
Non- Qualified Stock Option (right to buy)	\$52.76						05/05/2006 ⁽³⁾	05/05/2013	Common Stock	6,000		6,000	D	

Explanation of Responses:

1. 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.

2. Grant to reporting person of right to buy shares of common stock exercisable 100 percent on the first anniversary of the date of grant.

3. Grant to reporting person of right to buy shares of common stock exercisable immediately.

By: Susan Hanlon For: Mark <u>Kroll</u>

08/04/2008

** Signature of Reporting Person 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.