Instruction 1(b)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 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

1. Name and Address of Reporting Person* FORISH JOSEPH J						2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [ HAE ]										ck all applic Directo	r		10% Ow	/ner	
(Last) (First) (Middle) 400 WOOD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 10/24/2007										x	below)	Officer (give title below)  VP, Human Re		Other (s below) ources	;респу	
(Street)	TREE M	1A 02184			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting					
(City)	(S	state)	(Zip)													Person					
		Tal	ble I - Nor	n-Deriv	/ativ	e Se	curitie	s A	cquir	ed, D	isp	osed of	f, or	3en	eficially	Owned					
1			2. Transaction Date (Month/Day/Yea		- 1	Execution		e,   Ti   C	3. Transaction Code (Instr. 8)				I (A) or . 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									ode	,	Amount	(4	() or ()	Price	Transact (Instr. 3 a	ion(s)			(3 4)		
Common	Stock			10/24	4/200	)7				A		737(1)		A	\$0.01	1,7	47(2)	D			
			Table II -									sed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	ate, T	ransa Code (	nsaction of Ex			Expir	5. Date Exercisable and Expiration Date Month/Day/Year)  Month/Day/Year)  7. Title and Ar of Securities Underlying Derivative Sec (Instr. 3 and 4)					es Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exerc	cisable		Expiration Date	Title		Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$51.07	10/24/2007			A		11,799		10/24	J/2008 <sup>(3)</sup>	1	0/24/2014	Comr		11,799	\$0	11,799		D		
Non- Qualified Stock Option (right to buy)	\$48.195								12/19	)/2006 <sup>(3)</sup>	1	2/19/2012	Comr Stoo		75,000		75,000	)	D		
Non- Qualified Stock Option	\$52.76								05/05	5/2007 <sup>(3)</sup>	0	5/05/2013	Comr		10,373		10,373	3	D		

## **Explanation of Responses:**

buy)

- 1. Restricted Stock Unit Grant which vest 25% per year over 4 years following the grant date. Grant was made under 2005 Long Term Incentive Compensation Plan.
- 2. Total includes Restricted Stock Awards and/or Restricted Stock Units that are subject to restrictions until vesting requirements are met. Grants was made under 2005 Long Term Incentive Compensation Plan.
- 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 Hanlon For: Joseph J 10/26/2007 Forish

Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.