FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) ((Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/23/2012									X Officer (give title below) Other (specify below) VP, Human Resources						
(Street) BRAINTREE MA (02184			4. If Amendment, Date of 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					
(City) (State) (Zip)			(Zip)										Person							
			le I - No			_			cquired,	Dis	_							1		
Dat			Date	2. Transaction Date Month/Day/Yea		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Ins			ities Acquired (A) d Of (D) (Instr. 3,		4 and Secu Bene		ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	(A) or (D) Price		Transact (Instr. 3	ion(s)			,	
Common Stock				10/23/2012		2			D		79(1)	D \$		8.04	8,418(2)			D		
		7							quired, C ts, optior						wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		5. Number 6.		Expiration	6. Date Exercisal Expiration Date (Month/Day/Year)		of Securit Underlyin	ying ive Security		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er						
Non- Qualified Stock Option (right to buy)	\$51.07								10/24/2008	(3)	.0/24/2014	Common Stock	11,79	99		11,799	9	D		
Non- Qualified Stock Option (right to buy)	\$52.94								10/27/2010	(3)	0/27/2016	Common Stock	14,69	90		14,690	0	D		
Non- Qualified Stock Option (right to buy)	\$54.55								10/22/2009	(3)	.0/22/2015	Common Stock	11,9	11		11,91	1	D		
Non- Qualified Stock Option (right to buy)	\$54.99								10/27/2011	(3)	0/27/2017	Common Stock	15,38	38		15,38	8	D		
Non- Qualified Stock Option (right to	\$61.34								10/25/2012	(3)	0/25/2018	Common Stock	15,37	70		15,370	0	D		

Explanation of Responses:

- 1. Pursuant to a 10b5-1 Plan to cover tax liability for released shares.
- 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.
- 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

10/25/2012

** 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.

ersons 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.	