FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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	Secti	on 30(h)	of th	e Investment	Con	npany Act	of 1940								
1. Name and Address of Reporting Person* <u>HANLON SUSAN M</u>						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) 400 WOOD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 10/27/2009									X Officer (give title Other (specify below) VP Finance						
(Street) BRAINTREE MA 02184				4. 1	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						
(City) (State) (Zip)															Person					
1. Title of	Security (Ins		ole I - No	2. Trans			2A. Deen	ned	cquired, D		4. Securit	ties Acq	uired (A	A) or	5. Amour	nt of			7. Nature	
Date (Month/Da				/Day/Ye	ear)	Execution Date if any (Month/Day/Ye		Code (In		5)	(D)		, 4 and	Securitie Beneficia Owned F Reported	ally ollowing I	Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect Beneficial Ownership (Instr. 4)		
				= (0.00					<u> </u>	Amount			Price	Transaction(s) (Instr. 3 and 4)		Б				
Common Stock 10/27/							urities	Acc	auired. Dis	spc	sed of, or Benefic			\$0 4,974 ⁽²⁾			D			
4 Tid 6	١,	1		(e.g., p	outs,		s, war	rant	s, options	, C	onvertik	ole se	curiti	es) ¯		0.81		10	11. Nature	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year		Amount of		curity	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)	of Indirect Beneficial Ownership (Instr. 4)		
					Code	v			Date Exercisable		xpiration ate	Title	Amou or Numb of Title Share							
Non- Qualified Stock Option (right to buy)	\$52.94	10/27/2009			A		7,345		10/27/2010 ⁽³	1	0/27/2016	Commo		345	\$0	7,345	5	D		
Non- Qualified Stock Option (right to buy)	\$26.105								(3)	0	5/05/2014	Commo Stock		000		5,000		D		
Non- Qualified Stock Option (right to buy)	\$30.385								(3)	0	5/28/2012	Commo Stock		500		9,500		D		
Non- Qualified Stock Option (right to buy)	\$41.15								(3)	0	7/27/2012	Commo Stock		000		5,000)	D		
Non- Qualified Stock Option (right to buy)	\$51.07								10/24/2008 ⁽³	1	0/24/2014	Comm Stock		569		3,569)	D		
Non- Qualified Stock Option (right to buy)	\$52.76								05/05/2007 ⁽³⁾	0	5/05/2013	Commo Stock		282		7,282	2	D		
Non- Qualified Stock Option (right to	\$54.55								10/22/2009 ⁽³⁾	1	0/22/2015	Commo Stock		603		3,603	3	D		

- 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. 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.

Susan M Hanlon 10/29/2009

** 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.