SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer sub	niect to
	JCCI IO
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OWR APPRO	JVAL
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		of Section So(n) of the investment Company Act of 1940						
Dockendorff Charles J		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% Owner Other (specify below)			
		3. Date of Earliest Transaction (Month/Day/Year) 07/21/2015		Officer (give title below)				
		4. If Amendment, Date of Original Filed (Month/Day/Year)		idual or Joint/Group Filing (Check Applicable			
MA	02184		Line) X	Form filed by More than	0			
State)	(Zip)			Person				
	harles J First) D	harles J First) (Middle) D MA 02184	2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE] First) (Middle) 0 3. Date of Earliest Transaction (Month/Day/Year) 07/21/2015 4. If Amendment, Date of Original Filed (Month/Day/Year)	of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Rela HAEMONETICS CORP [HAE] 3. Date of Earliest Transaction (Month/Day/Year) 5. Rela First) (Middle) 07/21/2015 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indiv MA 02184 X X	HAEMONETICS CORP [HAE] (Check all applicable) harles J 3. Date of Earliest Transaction (Month/Day/Year) (Check all applicable) MA 02184 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Line) MA 02184 Form filed by One Report Person			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities / Disposed Of (5)			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)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(iiisti: 4)
Common Stock	07/21/2015		Α		4,337 ⁽¹⁾	Α	\$0.0	7,153	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Restricted Stock Unit Grant which vest 100% on the first anniversary of the grant date. Grant was made under 2005 Long Term Incentive Compensation Plan.

<u>By: Alexander Steffan For:</u> <u>Charles Dockendorff</u>

07/23/2015

** 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.