FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

## Check this box if no longer subject to 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

1. Name and Address of Reporting Person* FORISH JOSEPH J						2. Issuer Name <b>and</b> Ticker or Trading Symbol  HAEMONETICS CORP [ HAE ]										k all applic Directo	cable) or	g Pers	son(s) to Iss	wner	
(Last) (First) (Middle) 400 WOOD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 05/01/2008									X Officer (give title below) Other (specify below)  VP, Human Resources					specify		
(Street) BRAINTREE MA 02184  (City) (State) (Zip)					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 Person					
		Tab	ole I - No	n-Deriv	vativ	e Se	curiti	es A	cquir	red, C	Dis	posed o	f, or B	enefic	cially	Owned	l				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			1 and 5) Securiti Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Co	ode V	,	Amount	(A) o (D)	r Pric	e	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock					L/2008	2008			P	(1)		479	A \$4		4.353	3 2,226 <sup>(2)</sup>			D		
		-	Table II -						-	-	-	osed of, onvertil			-	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactio Code (Instr 8)		n of E		Expira	. Date Exercisab xpiration Date Month/Day/Year)			of Secui Underly Derivati	Title and Amount of Securities Underlying Derivative Security Instr. 3 and 4)		s. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	cisable		Expiration Date	Title	Amo or Num of Shar	ber						
Non- Qualified Stock Option (right to buy)	\$48.195								12/19/	/2006 <sup>(3</sup>	) 1	2/19/2012	Common Stock	75,0	000		75,000	)	D		
Non- Qualified Stock Option (right to buy)	\$51.07								10/24/	/2008 <sup>(3</sup>	) 1	.0/24/2014	Common Stock	11,7	799		11,799	)	D		
Non- Qualified Stock Option (right to	\$52.76								05/05/	/2007 <sup>(3</sup>		05/05/2013	Common Stock	10,3	373		10,373	3	D		

## **Explanation of Responses:**

- 1. Acquisition of shares of Common Stock pursuant to the Employee Stock Purchase Plan. Participant elected to purchase shares at least six months in advance of the effective date of the transaction.
- 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 Hanlon For: Joseph J Forish

05/05/2008

\*\* 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.