ALLEN PETER M

Form 4

February 12, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB

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Check this box

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * ALLEN PETER M			2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(
400 WOOD ROAD			(Month/Day/Year) 02/10/2010	Director 10% Owner _X Officer (give title Other (specify below) Chief Marketing Officer		
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
BRAINTREE, MA 02184			Filed(Month/Day/Year)			

(City)	(State)	(Zip) Table	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	Owned Indirect (I) Ownersh		
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	02/10/2010		M	2,200 (1)	A	\$ 21.46	9,757 (2)	D	
Common Stock	02/10/2010		S	2,200 (1)	D	\$ 52.56	7,557 <u>(2)</u>	D	

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

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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. Transacti Code (Instr. 8)	Secu Acqu (A) (Disp (D)	orities uired or osed of r. 3, 4,	6. Date Exercisals Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Seci
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	An or No of
Non-Qualified Stock Option (right to buy)	\$ 21.46	02/10/2010		M		2,200 (1)	09/03/2004(3)	09/03/2013	Common Stock	2
Non-Qualified Stock Option (right to buy)	\$ 26.105						(3)	05/05/2014	Common Stock	1
Non-Qualified Stock Option (right to buy)	\$ 41.15						<u>(3)</u>	07/27/2012	Common Stock	1
Non-Qualified Stock Option (right to buy)	\$ 51.07						10/24/2008(3)	10/24/2014	Common Stock	1
Non-Qualified Stock Option (right to buy)	\$ 52.76						05/05/2007(3)	05/05/2013	Common Stock	1
Non-Qualified Stock Option (right to buy)	\$ 52.94						10/27/2010(3)	10/27/2016	Common Stock	1
Non-Qualified Stock Option (right to buy)	\$ 54.55						10/22/2009(3)	10/22/2015	Common Stock	1

Reporting Owners

Reporting Owner Name / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
ALLEN PETER M							
400 WOOD ROAD			Chief Marketing Officer				
BRAINTREE MA 02184							

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Signatures

By: Peter M Allen For: Susan M Hanlon 02/12/2010

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Pursuant to a 10b5-1 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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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