Edgar Filing: HANLON SUSAN M - Form 4

HANLON CUCANIN

HANLON S	USAN M											
Form 4												
February 03,	, 2009											
FORM	14								OMB AP	OMB APPROVAL		
	UNITED	Washington, D.C. 20549							OMB Number:	3235-0287		
Check th if no long subject to Section I Form 4 c Form 5 obligatio may cont See Instr	ger o 16. or Filed pur ^{nns} Section 17(STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						Expires: Estimated a burden hour response	-			
1(b). (Print or Type l	Responses)											
			2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]				C	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (I	Middle)	3 Data o	f Forliget Ti	ransaction	-	-	(Check all applicable)				
(Mo			(Month/E	 B. Date of Earliest Transaction Month/Day/Year) O2/02/2009 				Director 10% Owner X Officer (give title Other (specify below) below) VP Finance				
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person					
BRAINTRE	EE, MA 02184							Form filed by M Person	ore than One Rep	porting		
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative	Secu	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution D		n Date, if	Code (Instr. 3, 4 and 5)				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	02/02/2009			Code V M	Amount 3,000	(D) A	Price \$ 30.385	(Instr. 3 and 4) 7,508 (1)	D			
Common Stock	02/02/2009			S	3,000	D	\$ 63	4,508 <u>(1)</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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Ame Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ai or Ni of Sł
Non-Qualified Stock Option (right to buy)	\$ 30.385	02/02/2009		М	3,000	05/28/2003(2)	05/28/2012	Common Stock	3
Non-Qualified Stock Option (right to buy)	\$ 26.105					(2)	05/05/2014	Common Stock	4
Non-Qualified Stock Option (right to buy)	\$ 41.15					(2)	07/27/2012	Common Stock	47
Non-Qualified Stock Option (right to buy)	\$ 51.07					10/24/2008(2)	10/24/2014	Common Stock	3
Non-Qualified Stock Option (right to buy)	\$ 52.76					05/05/2007(2)	05/05/2013	Common Stock	7
Non-Qualified Stock Option (right to buy)	\$ 54.55					10/22/2009 <u>(2)</u>	10/22/2015	Common Stock	(1) (1)

Reporting Owners

Reporting Owner Name / Addr	ess	Relationships						
	Director	10% Owner	Officer	Other				
HANLON SUSAN M 400 WOOD ROAD BRAINTREE, MA 02184			VP Finance					
Signatures								
Susan M Hanlon	02/03/2009							
**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) 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.
- (2) 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.