## HAEMONETICS CORP Form 3 April 15, 2010 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

## INITIAL STATEMENT OF 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

## (Print or Type Responses)

1. Name and A Person <u>*</u> RUXIN M		_	<ul><li>2. Date of Event Re</li><li>Statement</li><li>(Month/Day/Year)</li></ul>		g 3. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]							
(Last)	(First)	(Middle)	04/12/2010		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)				
400 WOOD	ROAD											
	(Street)				(Check all applicable)		6 Individ	6. Individual or Joint/Group				
BRAINTRE	. ,	02184		X (give ti	Director10% Owner XOfficerOther (give title below) (specify below)			Eiling(Charle Annlinghie Ling)				
				VP (	Global Sof	ftware Strategi	es <u> </u>					
(City)	(State)	(Zip)	Tab	le I - Non-Do	- Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)			Bene	2. Amount of Securities Beneficially Owned (Instr. 4)		Ownership (	n: (Instr. 5) ect (D) ndirect					
Reminder: Rep owned directly			ach class of securities	beneficially	SEC	2 1473 (7-02)						
	Perso inform requin curren	ns who res nation conta red to respo ntly valid Ol	pond to the collec ained in this form and unless the forr MB control numbe	are not n displays a r.								
T	Table II - Der	rivative Secu	rities Beneficially O	wned (e.g., puts	, calls, wa	arrants, optio	ns, convertible	e securities)				
1. Title of Deri (Instr. 4)	vative Securi	Expir	ration Date /Day/Year)	3. Title and Am Securities Under Derivative Secu (Instr. 4)	rlying	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)				

Amount or

Number of

Shares

Title

or Indirect

(Instr. 5)

(I)

Exercisable Date

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

## **Reporting Owners**

Reporting Owner Name / Address	Relationships											
1	Director	10% Owner	Of	ficer	Other							
RUXIN MICHAEL I 400 WOOD ROAD BRAINTREE, MA 02184	Â	Â	Â	VP Global Software Strategies	Â							
Signatures												
By: James O'Shaughnessy For: M.D.	Michael		04/15/2010									
<u>**</u> Signature of Reporting P	erson	Date										
Explanation of Responses:												

No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(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. 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.