

HAEMONETICS CORP
Form 4/A
May 15, 2006

FORM 4

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

OMB APPROVAL

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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

(Print or Type Responses)

1. Name and Address of Reporting Person *
Popovsky Mark A

(Last) (First) (Middle)

HAEMONETICS CORPORATION, 400 WOOD ROAD

(Street)

BRAINTREE, MA 02184

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
HAEMONETICS CORP [HAE]

3. Date of Earliest Transaction (Month/Day/Year)
05/05/2006

4. If Amendment, Date Original Filed (Month/Day/Year)
05/09/2006

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)
VP, Corporate Medical Director

6. Individual or Joint/Group Filing (Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting 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)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	05/01/2006		P(1)	V	258 \$ 41.5225	A	D

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

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SEC 1474 (9-02)

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

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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. Transaction Code (Instr. 8)	5. Number of 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 Underlying (Instr. 3 and 4)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	
Non-Qualified Stock Option (right to buy)	\$ 22.7188	02/02/2006		S		7,000	08/04/2001 ⁽²⁾	08/04/2010	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 26.105	05/05/2004		A		10,000	05/05/2005 ⁽²⁾	05/05/2014	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 31.66	04/29/2002		A		15,000	04/29/2003 ⁽²⁾	04/29/2012	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 33.15	04/30/2001		A		11,230	04/30/2002 ⁽²⁾	04/30/2011	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 41.15	07/27/2005		A		17,000	07/27/2006 ⁽²⁾	07/27/2015	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 52.76	05/05/2006		A		14,891	05/05/2007	05/05/2013	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Popovsky Mark A HAEMONETICS CORPORATION 400 WOOD ROAD BRAINTREE, MA 02184			VP, Corporate Medical Director	

Signatures

Ronald J. Ryan for Mark A. Popovsky
05/15/2006

**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).

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- (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) 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.
- (3) The number of shares underlying this option were previously reported incorrectly as a result of a software error.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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