FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL						
l	OMB Number:	3235-0287						
l	Estimated average burden							
l	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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				0.		11 00(11) 0	of title i	iivesiiieiii C	ompany Ac	1011340								
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Lazzaris Diane</u>					TESSO INTERIORIE INC						'		Director		10% Owner			
(Look) (Finel) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)						X Officer below)	(give title	e Other (below)		pecify		
(Last) (First) (Middle) 225 WEST STATION SOUARE DRIVE						02/21/2013						Vice President, Legal Affairs						
SUITE 700																		
					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ir	6. Individual or Joint/Group Filing (Check Applicable						
(Street)											Line	,	::	D	. D			
PITTSBUI	RGH PA	15	5219								'		iled by One I					
				-								Form filed by More than One Reporting Person						
(City)	(Sta	te) (Z	ip)															
		Table	e I - Non-Dei	ivative	Sec	urities	s Acc	quired, Di	sposed	of, or Be	neficiall	y Owned						
1. Title of Se	curity (Instr.	3)		nsaction		A. Deeme		3.		ities Acquire		5. Amou		6. Owners		. Nature of		
Date (Month/D					ar) if	Execution Date, if any		Code (Instr. 5)		d Of (D) (Ins	tr. 3, 4 and	Securitie Beneficia	ally (Form: Dir (D) or Ind	irect E	Indirect Beneficial Ownership (Instr. 4)		
					(N	(Month/Day/Year)		r) 8)		1		Reported	1 [(I) (Instr. 4				
								Code V	Amoun	(A) or (D)	Price	Transact (Instr. 3 a						
		Tá	able II - Deriv	ative S	Secu	rities /	Acar	ired. Dis	posed o	. or Bene	eficially	Owned	•		,	-		
								options,										
1. Title of	2.	3. Transaction	3A. Deemed	4.				6. Date Exercisable and 7. Title and				8. Price of	9. Number		10.	11. Nature		
Derivative Security	Conversion or Exercise		Execution Date if any (Month/Day/Yea	Code				Expiration Date Amount of (Month/Day/Year) Securities				Derivative Security	derivative Securities	Foi		Beneficial		
(Instr. 3)	Price of Derivative					Securi	ities	Underlying Derivative S				(Instr. 5)	Beneficially Owned		ect (D)	Ownership (Instr. 4)		
	Security						(A) or		(Instr. 3 and 4)				Following		(I) (Instr. 4)	(111501. 4)		
						Disposed of (D)							Reported Transaction	n(s)				
					(Ins			(Instr. 3, 4 and 5)					(Instr. 4)					
						1	П		Ι	 	Amount	1						
							ΙI				or Number							
				Code	\v	(A)	(D)	Date Exercisable	Expiration Date	Title	of Shares							
Stock						†	1			Commer								
Appreciation Rights	\$72.15	02/21/2013		A		7,580		(1)	02/21/202	Stock Stock	7,580	\$0.00	7,580		D			
Restricted Stock Units	(2)	02/21/2013		A		1,316	П	(3)	(3)	Common Stock	1,316	\$0.00	1,316		D			

Explanation of Responses:

- 1. Each Stock Appreciation Right becomes exercisable in three (3) equal, annual installments beginning on the first anniversary of the date of grant.
- 2. Each Restricted Stock Unit represents a contingent right to receive one share of WESCO Common Stock.
- 3. The Restricted Stock Units vest in three years from the date of the grant.

Remarks:

/s/ Samantha L. O'Donoghue, as Attorney-in-Fact 02/25/2013

** 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.