FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APF	PROVAL
OMB Number:	3235-028

OMB Number:	3235-0287
Estimated average burden	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* WAY KENNETH L					2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 225 WEST STATION SQUARE DRIVE, SUITE 700						e of Earliest /2004	r/Year)		Officer (gi below)	ve title	Other (specify below)									
(Street) PITTSBURGH PA 15219					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)												Point lieu by More triall Offe Reporting Person								
			Table I - Non	-Deriv	ative	Securitie	es A	cquired, I	Disp	osed	of, or E	3enefi	cially O	wned						
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Execution (if any	2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Dispose Code (Instr.			urities Acquired (A) or sed Of (D) (Instr. 3, 4 an		and 5) Securities Beneficially Following I		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amour	mount (A) or (D)		Price	Transaction (Instr. 3 and	1(S) 1 4)			(Instr. 4)		
WESCO	COMMON	STOCK												89,5	53		D			
	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. Transa Code (8)	5. Number of 6. De action Derivative Exp		6. Date Exer Expiration D	Date Exercisable and Expiration Date Month/Day/Year) 7. Title and Amount Securities Underlying Derivative Security and 4)			unt of lying	8. Price of Derivative Security (Instr. 5)		ve es ially ng	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisable	Exp Dat	iration e	Title	Nu	ount or mber of ares	(Instr. 4						
WESCO COMMON STOCK	\$6.4							07/01/2005	07/0	01/2012	WESC COMM STOC	ON	5,000		5,0	000 D				
WESCO COMMON STOCK	\$6.75							07/01/2006	07/	01/2013	WESC COMM STOC	NC	5,000		10,000		10,000		000 D	
WESCO COMMON STOCK	\$8.8125							(1)		(1)	WESC COMM STOC	on 2,8	336.8794		12,836.8794		D			
WESCO COMMON STOCK	\$7.2813							(1)		(1)	WESC COMM STOC	ON 3,4	133.4528		16,270	.3322	D			
WESCO COMMON STOCK	\$4.775							(1)		(1)	WESC COMM STOC	0 N $\left 6,2 \right $	282.7225		22,553	53.0547 D				
WESCO COMMON STOCK	\$5.575							(1)		(2)	WESC COMM STOC	on 5,3	381.1659		27,934	.2206	D			
WESCO COMMON STOCK	\$17.9							07/01/2007	07/0	01/2014	WESC COMM STOC	NC	5,000		32,934	.2206	D			
WESCO COMMON	\$9.01	12/31/2004	12/31/2004	A		3,329,6337		(1)		(1)	WESC	O 3.3	329.6337	\$9.01	36,263	.8543	D			

Explanation of Responses:

- 1. Deferred Share Unit Account balance will be paid upon termination of services as a Director.
- 2. Shares are credited to a Deferred Share Unit Account maintained at WESCO.

Remarks:

KENNETH L. WAY ** Signature of Reporting Person

STOCK

01/04/2005

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.