FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5 obligation
may continue. See Instruction 1(h)

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*     GOODWIN WILLIAM M				2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [ WCC ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 225 WEST STATION SQUARE DRIVE, SUITE 700						te of E		t Trans	action (Month	/Day/	Year)	X	Officer (give below) VICE PRE		Other (specify below)  NT, OPERATIONS		, I			
(Street) PITTSBURGH PA 15219					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(City) (State) (Zip)													Form filed by More than One Reporting Person							
		Tab				_			cquired, [	Disp								1		
Date				nsaction h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction I Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amount of 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)			
									Code	v	Amoun	Amount (A) or (D)		Price	(Instr. 3 and 4)				(IIISU: 4)	
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 D if any (Month/Day/	ate,	4. Transa Code ( 8)	action (Instr.	of Deri Sec Acq (A) o Disp	vative urities uired or oosed O) tr. 3, 4	Minimber Expiration Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo Securities Under Derivative Securities und 4) 7. Title and Amo Securities Under Derivative Under Derivative Under Derivative Under Derivative Under Derivative Unde		ities Underl tive Securi	ying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable	Exp Dat	iration e	Title		Amount or Number of Shares						
OPTION FOR WESCO INTERNATIONAL COMMON STOCK	\$30.76	06/22/2005	06/22/2005		X			3,200	08/22/2004	08/2	22/2013	WESCO INTERNATIONAL COMMON STOCK		3,200	\$5.9	241,960		D		
OPTION FOR WESCO INTERNATIONAL COMMON STOCK	\$30.75	06/22/2005	06/22/2005		х			2,900	08/22/2004	08/2	22/2013	WESCO INTERNATIONAL COMMON STOCK		L 2,900	\$5.9	239,060		D		
OPTION FOR WESCO INTERNATIONAL COMMON STOCK	\$30.7	06/22/2005	06/22/2005		X			3,000	08/22/2004	08/2	22/2013	3 WESCO INTERNATIONAL COMMON STOCK		3,000	\$5.9	236,060		D		
OPTION FOR WESCO INTERNATIONAL COMMON STOCK	\$30.97	06/22/2005	06/22/200	05	х			1,025	08/22/2004	08/2	22/2013	INTER	VESCO RNATIONA OMMON STOCK	L 1,025	\$5.9	235,	,035	D		
OPTION FOR WESCO INTERNATIONAL COMMON	\$30.78	06/22/2005	06/22/200	05	X			400	08/22/2004	08/2	22/2013	INTER	VESCO RNATIONA OMMON STOCK	L 400	\$5.9	234,	,635	D		

**Explanation of Responses:** 

Remarks:

/s/ WILLIAM M. GOODWIN \*\* Signature of Reporting Person

Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).