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

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## Washington, D.C. 20549

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

e Responses	)													
1. Name and Address of Reporting Person * KAMERICK EILEEN A				2. Issuer Name and Ticker or Trading Symbol WESTELL TECHNOLOGIES INC [WSTL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X. Director 10% Owner				
(Last) (First) (Middle) 750 NORTH COMMONS DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 11/26/2013						Officer (give title below) Other (specify below)				
(Street) AURORA, IL 60504				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person				
<u> </u>	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own					ned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any	(Instr. 8)				of (D) Ov Tra	D) Owned Follow Transaction(s		wing Reported		Beneficial	
			(Month/Day/ Fear)		Code	V	Amou	(A) or (D)	Price	isti. 3 aliq -	7)		or Indirect (I) (Instr. 4)	
ommon Sto	ock	11/26/2013			M		20,00	0 A	\$ 2.75   80	80,000		D		
ommon Sto	ock	11/26/2013			S		20,00	011)	· 160	60,000			D	
						ptions,	, conve	rtible secu	rities)					
2. Conversion or Exercise	3. Transaction	Table II -  3A. Deemed Execution Date, n)	Derivative S (e.g., puts, c) 4. Transactic	Securit alls, was 5. Non of Der	ies Acqui arrants, o Number	Personn form ared, Di pptions, 6. Date Expira	sons watained in displaying isposed is converted to the convertion Date is the converted in	in this for ays a curue of, or Bent tible seculisable and te	rm are not rently valideficially Overities)  7. Title and Amount of Underlying	t required d OMB co wned and of	8. Price of Derivative Security	9. Number of Derivative Securities	of 10. Owners Form o	Beneficia
Derivative Security		(	A (A D (I (I		quired or sposed of str. 3, 4,							Owned Following Reported	Security Direct ( or Indir (s) (I)	y: (Instr. 4) D) ect
						Date Exerci	sable [	expiration Date	Title	Amount or Number of Shares				
			Code	V (A)	(D)					Bilaics				
,	Address of CK EILEE! CH COMM IL 60504 Curity Curity Common Stormson Stormso	Address of Reporting Person  K EILEEN A  H COMMONS DRIVE  (Street)  IL 60504  (State)  curity  curity  3. Transaction Date Or Exercise Price of Derivative	Address of Reporting Person *-  CK EILEEN A  (First)  CH COMMONS DRIVE  (Street)  IL 60504  (State)  (Zip)  Curity  2. Transaction Date (Month/Day/Year)  Conversion Date Conversion Conver	Address of Reporting Person 2. Issuer N  CK EILEEN A  (First) (First) (Street)  (Month/Day/Year)  (Street)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Reserved Street Code (Instr. 8)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)	Address of Reporting Person 2	Address of Reporting Person 2  Address of Reporting Person 4  CK EILEEN A  (First) (H COMMONS DRIVE  (Street)  (A. Deemed Execution Date, if Code (Instr. 8)  (Code (Instr. 8)  (Instr. 8)  (Code (Instr. 8)  (Log., puts, calls, warrants, or Code (Instr. 8)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Instr. 8)  (Instr. 8)  (Instr. 8)	Address of Reporting Person 2  CK EILEEN A  (First)  (First)  (Street)  (Month/Day/Year)  (Street)  (Street)  (Street)  (Street)  (Street)  (Month/Day/Year)  (Street)  (Month/Day/Year)  (Street)  (Month/Day/Year)  (Code V  (Code V  (Month/Day/Year)  (Code V  (Code V  (Instr. 8)  (Code V  (Code	Address of Reporting Person **  CK EILEEN A  CFirst)  (Middle)  (Street)  (Street)  (Strate)  (Strate)  (State)  (Zip)  (Month/Day/Year)  (A)  (Code V Amount (Instr. 8)  (Ins	Address of Reporting Person *  CK EILEEN A  (First) (H COMMONS DRIVE  (Street)  (Street)  (Street)  (Street)  (Street)  (State)  (Zip)  (Zip)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (A) or Disposed of (Instr. 3, 4 and 5)  (Month/Day/Year)  (Month/Day/Year)	Address of Reporting Person 2  EX EILEEN A  (First)  (Street)  (Street)  (Street)  (Strate)  (A) or Disposed of (B) or Disposed or Disposed or Disposed or Disposed or Disposed or D	Address of Reporting Person *  IX EILEEN A  (First) (First) (Street) (Street) (State)  (A) or Disposed of (D) Owned (A) or Disposed of (D) Owned (A) or Disposed of (D) Owned (Base of Capacity of Contained in this form are not required form displays a currently valid OMB of Expertision Date (A) or Disposed of (D) Owned (Ce.g. puts, calls, warrants, options, convertible securities)  (Code)  (Cod	Address of Reporting Person **    Column	Address of Reporting Person     X: EILEN A   X: ESPELL TECHNOLOGIES INC [WSTL]   X: Director   Officer give title below   Officer	Address of Reporting Persons 2  IX EILERN A  WESTELL TECHNOLOGIES INC [WSTL]  (First)

D (1 0 N /41)	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KAMERICK EILEEN A						
750 NORTH COMMONS DRIVE	X					
AURORA, IL 60504						

#### **Signatures**

/s/Amy T. Forster, by power of attorney	11/26/2013		
**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).
- (1) Options were originally granted 6/18/2007 and vested in equal installments over a five year period.

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.