

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

| OMB APPROVAL                                 |           |
|--|-----------|
| OMB Number:                                  | 3235-0104 |
| Estimated average burden hours per response: | 0.5       |

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

|   |  |   |  |
|---|--|---|--|
| 1. Name and Address of Reporting Person*<br><u>DeVore Donald C Jr</u><br><br>(Last) (First) (Middle)<br><u>DUCOMMUN INCORPORATED</u><br><u>23301 WILMINGTON AVE.</u><br><br>(Street)<br><u>CARSON CA 90745-6209</u><br><br>(City) (State) (Zip) | 2. Date of Event Requiring Statement (Month/Day/Year)<br><u>01/31/2008</u> | 3. Issuer Name and Ticker or Trading Symbol<br><u>DUCOMMUN INC /DE/ [ DCO ]</u>   |  |
|   |  | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br>Director 10% Owner<br><input checked="" type="checkbox"/> Officer (give title below) Other (specify below)<br><p style="text-align: center;"><u>VP &amp; Treasurer</u></p> | 5. If Amendment, Date of Original Filed (Month/Day/Year)<br><br>6. Individual or Joint/Group Filing (Check Applicable Line)<br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> Form filed by More than One Reporting Person |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------|---|--|---|
| <u>Common Stock</u>             | <u>50</u>   | <u>D</u>   |   |

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) |                   | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|-------------------|---|--|--|---|
|  | Date Exercisable   | Expiration Date   |   |  |  |   |
| <u>Option - Right to Buy<sup>(1)</sup></u> | <u>06/23/2008</u>  | <u>06/22/2011</u> | <u>Common Stock</u><br>1,250  | <u>19.9</u>  | <u>D</u>   |   |
| <u>Option - Right to Buy<sup>(1)</sup></u> | <u>06/30/2006<sup>(2)</sup></u>                          | <u>06/29/2012</u> | <u>Common Stock</u><br>5,000  | <u>16.91</u>   | <u>D</u>   |   |
| <u>Option - Right to Buy<sup>(1)</sup></u> | <u>06/26/2007<sup>(3)</sup></u>                          | <u>06/25/2013</u> | <u>Common Stock</u><br>3,000  | <u>19.05</u>   | <u>D</u>   |   |
| <u>Option - Right to Buy<sup>(1)</sup></u> | <u>06/26/2008<sup>(4)</sup></u>                          | <u>06/25/2014</u> | <u>Common Stock</u><br>3,000  | <u>25.82</u>   | <u>D</u>   |   |

**Explanation of Responses:**

- The option represents the right to purchase common stock granted under the Ducommun Incorporated Employee Stock Option Plans, which are Rule 16b-3 plans.
- The option vested or will vest in four equal installments on June 30, 2006, 2007, 2008 and 2009.
- The option vested or will vest in four equal installments on June 26, 2007, 2008, 2009 and 2010.
- The option will vest in four equal installments on June 26, 2008, 2009, 2010 and 2011.

/s/ Donald C. DeVore Jr.      02/01/2008  
 \*\* 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 5 (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.