FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* HEISER JAMES S						2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [DCO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
HEISE	R JAMES	<u> </u>			-	<u> </u>	<u> </u>		1,072	<u></u>	200]			Direct	or		10% Ov	vner
-															r (give title		Other (s	specify
(Last)	(Fi	rst)	(Middle)		3. [3. Date of Earliest Transaction (Month/Day/Year)								below	,		below)	
` '	`	,	(05	05/03/2013								V	VP and General Counsel			
DUCOM	IMUN INC	ORPORATED																
23301 W	/ILMINGTO	ON AVE.																
					4.1	f Ame	endme	nt. Date c	of Origina	Filed	(Month/Da	av/Year)	6.	ndividual or	Joint/Group	Filina	(Check Ap	olicable
(C++)								,	. 3			, ,	Lir				(
(Street)														X Form	filed by One	e Repo	rting Persor	n
CARSO	N C	A	90745-62	09										Eorm	Form filed by More than One Reporting			tina
					-									Perso		e iliali	Опе кери	ung
(City)	(6)	tate)	(Zip)															
(City)	(3)	iale)	(Zip)															
		Tab	le I - No	n-Deri	vativ	e Se	curit	ties Ac	quired,	Dis	posed o	f, or Be	neficia	lly Owne	d			
1 Title of 9	Security (Inst	tr 3)		2. Trans	saction	action 2A. Deemed				3. 4. Securities Acquire			ed (A) or	5. Amo	5. Amount of		nership	7. Nature
± 0	becauty (iiis	0,		Date				Execution Date,		Transaction		Disposed Of (D) (Instr. 3, 4		d Securit	es	Form	: Direct	of Indirect Beneficial Ownership
				(Month/Day/Year			if any (Month/Day/Year)			Code (Instr.		5)			Beneficially Owned Following	(D) or Indirect (I) (Instr. 4)		
						(Month/Day/Year		" ")	-					Reported	(1) (111501. 4)	(Instr. 4)		
									Code	Ιv	Amount	(A) oi (D)	Price	Transa	ction(s)			` '
												(D)		(Instr. 3	and 4)			
Common	Stock			05/0	3/201	3			M		7,500) A	\$18.	23 19	9,192		D	
							_	-			-							
Common Stock 05/03			3/201	/2013		F		6,476	5 D	\$25	4 12	12,716		D				
						_												
			Гable II -											/ Owned				
				(e.g., _l	puts,	call	s, wa	arrants	, optio	ns, c	onvertil	ble secu	ırities)					
1. Title of										Date Exercisable and 7. Title and				8. Price of	9. Number of		10.	11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any			Code (Instr. D				Expiration Date Amount of Month/Day/Year) Securities					Derivative derivative Security Securitie		Ownership Form:	ip of Indirect Beneficial
(Instr. 3)	Price of	(MOHUI/Day/Teal)	II ally (Month/Day		8)					yrrea)	Underlying		(Instr. 5)	Beneficially		Direct (D)	
(Derivative		(,,,,,,	٠,		Acquired					Derivative	Security	(Owned	´	or Indirect	(Instr. 4)
	Security					(A) or Disposed		[((Instr. 3 and 4)			Following Reported		(I) (Instr. 4	1	
							of (D)								Transaction(s) (Instr. 4)			
						(Instr. 3, 4								`				
							and 5)							_	1			
													Amount	:		- 1		
													or Number		1			
									Date		Expiration		of		1			
					Code	١v	(A)	(D)	Exercisab		Date	Title	Shares					
Option -													Ì		Ť T	T		
Right to	\$18.23	05/03/2013			M			7,500	06/29/201)(2)	06/28/2016	Common Stock	7,500	\$0	2,500		D	

Explanation of Responses:

- 1. The option represents the right to purchase common stock granted under the Ducommun Incorporated Employee Stock Option Plans, which are Rule 16B-3 plans.
- 2. The option vested or will vest as to 2,500 shares on each of June 29, 2010, June 29, 2011, June 29, 2012 and June 29, 2013.

/s/ James S. Heiser 05/03/2013

** 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.