The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

#### Notice of Exempt Offering of Securities

# OMB APPROVAL OMB 3235-Number: 0076 Estimated average burden hours per 4.00 response:

1. Issuer's Identity

CIK (Filer ID Nu	mher)	evious ames	X None		Entity Type
0000792966					X Corporation
Name of Issue	er				Limited Partnership
FARMERS & MERCHAN BANCORP INC	TS				Limited Liability Company General Partnership
Jurisdiction o Incorporation/Orga					Business Trust
OHIO					Other (Specify)
Year of Incorpora	tion/Organization				
X Over Five Years Ago					
Within Last Five Years (	Specify Year)				
Yet to Be Formed					
2. Principal Place of Busine	ss and Contact Infor	mation			
Name	of Issuer				
FARMERS & MERCHAN					
	Address 1			Street A	ddress 2
307 North Defiance Street					
City	State/Province/	Country	ZIP/Posta	alCode	Phone Number of Issuer
Archbold	OHIO	-	43502		(419) 446-2501
3. Related Persons					
Last Name		Firs	t Name		Middle Name
Eller	Lars			В.	
Street Address 1	L	Street A	Address 2		
307 North Defiance Street					
City	St	ate/Prov	ince/Country		ZIP/PostalCode
Archbold	OHIO			43502	
<b>Relationship:</b> X Executive	Officer X Director	Promot	er		
Clarification of Response (i	f Necessary):				
Last Name		Firs	t Name		Middle Name
Briggs	Andrew			J.	
Street Address 1	L	Street	Address 2		
307 North Defiance Street					
City	C+	ato/Dros	inco/Country		7ID/DostalCode

	City St	ate/Province/Country		ZIP/PostalCode
Archbold	OHIO		43502	
<b>Relationship:</b>	Executive Officer X Director	Promoter		

Clarification of Response (if Necessary):

Last Name	<b>First Name</b> Jack	C.	Middle Name	
Johnson Street Address 1	Jack Street Address 2	L.		
307 North Defiance Street	Sufer Address 2			
City	State/Province/Country		ZIP/PostalCode	
Archbold	ОНІО	43502		
<b>Relationship:</b> Executive Office				
Clarification of Response (if Nece	essary):			
Last Name	First Name		Middle Name	
Simon	Frank	R.		
Street Address 1	Street Address 2			
307 North Defiance Street				
City	State/Province/Country		ZIP/PostalCode	
Archbold	OHIO	43502		
<b>Relationship:</b> Executive Office	er X Director Promoter			
Clarification of Response (if Nece	essary):			
Last Name	First Name		Middle Name	
Burkholder	Eugene	N.		
Street Address 1	Street Address 2			
307 North Defiance Street				
City	State/Province/Country	/ <b>·</b> ····	ZIP/PostalCode	
	OHIO	43502		
Archbold		10002		
Archbold <b>Relationship:</b> Executive Office		10002		
	er X Director Promoter	10002		
Relationship: Executive Office Clarification of Response (if Nece Last Name	er X Director Promoter essary): <b>First Name</b>		Middle Name	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston	er X Director Promoter essary): <b>First Name</b> Lori	A.	Middle Name	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1	er X Director Promoter essary): <b>First Name</b>		Middle Name	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street	er X Director Promoter essary): Lori First Name Lori Street Address 2			
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City	er X Director Promoter essary): Lori First Name Lori Street Address 2 State/Province/Country	А.	Middle Name ZIP/PostalCode	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold	er X Director Promoter essary): Lori Street Address 2 State/Province/Country OHIO			
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City	er X Director Promoter essary): Lori Street Address 2 State/Province/Country OHIO	А.		
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter	А.		
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter	А.		
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary):	А.	ZIP/PostalCode	
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Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Last Name Sauder	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin	A. 43502	ZIP/PostalCode	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Last Name Sauder Street Address 1	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin	A. 43502	ZIP/PostalCode	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Last Name Sauder Street Address 1 307 North Defiance Street	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin Kevin Street Address 2	A. 43502	ZIP/PostalCode Middle Name	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Last Name Sauder Street Address 1 307 North Defiance Street City	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin First Name Street Address 2 Street Address 2	A. 43502 J.	ZIP/PostalCode Middle Name	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Last Name Sauder Street Address 1 307 North Defiance Street City Archbold	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin First Name Street Address 2 OHIO er X Director Promoter	A. 43502 J.	ZIP/PostalCode Middle Name	
Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Last Name Sauder Sauder Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin First Name Street Address 2 OHIO er X Director Promoter	A. 43502 J.	ZIP/PostalCode Middle Name	
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Relationship: Executive Office Clarification of Response (if Nece Last Name Johnston Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Sauder Street Address 1 307 North Defiance Street City Archbold Relationship: Executive Office Clarification of Response (if Nece Clarification of Response (if Nece	er X Director Promoter essary): First Name Lori Street Address 2 State/Province/Country OHIO er X Director Promoter essary): First Name Kevin Street Address 2 Street Address 2 Street Address 2 First Name (NHO) er X Director Promoter essary): First Name	A. 43502 J. 43502	ZIP/PostalCode Middle Name ZIP/PostalCode	
Relationship:       Executive Office         Clarification of Response (if Nece         Johnston       Street Address 1         Johnston       Street Address 1         JO7 North Defiance Street       City         Archbold       Executive Office         Clarification of Response (if Nece       City         Sauder       Last Name         Sauder       City         Archbold       Relationship:         Executive Office       City         Archbold       Relationship:         City       Archbold         Relationship:       Executive Office         City       Archbold         Relationship:       Executive Office         Clarification of Response (if Nece       City         Archbold       Relationship:         Relationship:       Executive Office         Clarification of Response (if Nece       City         Last Name       Last Name	er X Director Promoter essary): First Name Lori Street Address 2 Street Address 2 OHIO er X Director Promoter essary): First Name Kevin Street Address 2 First Name OHIO oHIO er X Director Promoter essary): First Name First Name Street Address 2	A. 43502 J. 43502	ZIP/PostalCode Middle Name ZIP/PostalCode	

Archbold	OHIO	43502
<b>Relationship:</b> Executive Offic	er X Director Promoter	
Clarification of Response (if Nec	essary):	
Last Name	First Name	Middle Name
Hornish	Jo Ellen	
Street Address 1	Street Address 2	
307 North Defiance Street		
City	State/Province/Country	ZIP/PostalCode
Archbold	OHIO	43502
<b>Relationship:</b> Executive Offic	er X Director Promoter	
Clarification of Response (if Nec	essary):	
Last Name	First Name	Middle Name
Planson	Steven	J.
Street Address 1	Street Address 2	
307 North Defiance Street		
City	State/Province/Country	ZIP/PostalCode
Archbold	OHIO	43502
<b>Relationship:</b> Executive Offic	er X Director Promoter	
Clarification of Response (if Nec	essary):	
Last Name	First Name	Middle Name
Stamm	К.	Brad
Street Address 1	Street Address 2	
307 North Defiance Street		
City	State/Province/Country	ZIP/PostalCode
Archbold	OHIO	43502
<b>Relationship:</b> Executive Offic	er X Director Promoter	
Clarification of Response (if Nec	essary):	
Last Name	First Name	Middle Name
Britenriker	Barbara	J.
Street Address 1	Street Address 2	
307 North Defiance Street		
City	State/Province/Country	ZIP/PostalCode
Archbold	OHIO	43502
<b>Relationship:</b> X Executive Office	cer Director Promoter	
Clarification of Response (if Nec	essary):	
Last Name	First Name	Middle Name
Leininger	Edward	А.
Street Address 1	Street Address 2	
307 North Defiance Street		
City	State/Province/Country	ZIP/PostalCode
Archbold	OHIO	43502
<b>Relationship:</b> X Executive Office	cer Director Promoter	
Clarification of Response (if Nec	essarv):	

Rice	Rex	D.	
Street Address 1	Street Address 2		
307 North Defiance Street			
City	State/Province/Country		ZIP/PostalCode
Archbold	OHIO	43502	
Relationship: X Executive Officer	Director Promoter		
Clarification of Response (if Necessa	ary):		

# 4. Industry Group

Agriculture		Health Care	Retailing
Banking & Financial Services		Biotechnology	Restaurants
X Commercial Bank	ing	Health Insurance	Technology
Insurance		Hospitals & Physicians	Computers
Investing Investment Bankir	ıg	Pharmaceuticals	Telecommunications
Pooled Investment	t Fund	Other Health Care	Other Technology
Is the issuer regist		Manufacturing	Travel
an investment com the Investment Co		Real Estate	Airlines & Airports
Act of 1940?	mpuny	Commercial	Lodging & Conventions
Yes	No	Construction	Tourism & Travel Services
Other Banking &	Financial Services	<b>REITS &amp; Finance</b>	Other Travel
<b>Business Services</b>		Residential	Other
Energy		Other Real Estate	
Coal Mining			
Electric Utilities			

## 5. Issuer Size

Oil & Gas

Other Energy

Energy Conservation Environmental Services

<b>Revenue Range</b>	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

# 6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))	Investment Company	y Act Section 3(c)
Rule 504 (b)(1)(i)	Section 3(c)(1)	Section 3(c)(9)
Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii)	Section 3(c)(2)	Section 3(c)(10)
X Rule 506(b)	Section 3(c)(3)	Section 3(c)(11)
Rule 506(c)	Section 3(c)(4)	Section 3(c)(12)

Securities Act Section 4(a)(5)	Section 3(c) Section 3(c) Section 3(c)(	(6) Section 3(c)(14)	
7. Type of Filing New Notice Date of First Sale 2021-07-30 X Amendment	First Sale Yet to		
8. Duration of Offering			
Does the Issuer intend this offering to last more	than one year?	Yes X No	
9. Type(s) of Securities Offered (select all that a	pply)		
Equity X Debt Option, Warrant or Other Right to Acquire An Security to be Acquired Upon Exercise of Op Other Right to Acquire Security	-	Pooled Investment Fund Interes Tenant-in-Common Securities Mineral Property Securities Other (describe)	sts
10. Business Combination Transaction			
Is this offering being made in connection with a as a merger, acquisition or exchange offer?	business combina	ation transaction, such Yes X	No
Clarification of Response (if Necessary):			
11. Minimum Investment			
Minimum investment accepted from any outside	e investor \$1,000	USD	
12. Sales Compensation			
Recipient Boenning & Scattergood Inc.	Recipi 100	ent CRD Number None	
(Associated) Broker or Dealer X None	Numb	ciated) Broker or Dealer CRD er	X None
None Street Address 1	None	Street Address 2	
4 Tower Bridge, 200 Barr Harbor Drive	Suite 3		
City	State/P	rovince/Country	ZIP/Postal Code
West Conshohocken	PENNS	SYLVANIA	19428-2979
Check "All States" or check individual	All Fore States	ign/non-US	
FLORIDA			
INDIANA			
MARYLAND MASSACHUSETTS			
MICHIGAN			
MINNESOTA			
NEW HAMPSHIRE			
NEW JERSEY NEW MEXICO			
NEW YORK			
OHIO			

OREGON
PENNSYLVANIA
WEST VIRGINIA
WISCONSIN

13. Offering and Sales Amounts

Total Offering Amount	\$35,000,000 USD o	or	Indefinite
Total Amount Sold	\$35,000,000 USD		
Total Remaining to be Sold	\$0 USD o	or	Indefinite

Clarification of Response (if Necessary):

### 14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

33

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$525,000 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

• Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
FARMERS & MERCHANTS BANCORP INC	/s/ Lars B. Eller	Lars R. Filler		2021-08- 06

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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.