FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Burkhart James C (Mo			2. Date of Event Requiring Stater (Month/Day/Year 06/21/2005	nent	3. Issuer Name and Ticker or Trading Symbol FARMERS & MERCHANTS BANCORP INC [ NONE ]							
(Last) 307-11 N DEF	(First) (Middle) N DEFIANCE ST			Officer (since title Oth			s) to Issuer 10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year)     6. Individual or Joint/Group Filing (Check			
(Street) ARCHBOLD (City)	OH (State)	43502 (Zip)			X	Senior VIce Pres	below)	City		cable Line) Form filed b	y One Reporting Person y More than One	
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						int of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common						0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conv		Conve or Exe	rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Deriva Securi	tive	Direct (D) or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

Remarks:

<u>Lydia A Huber</u> <u>06/21/2005</u>

\*\* 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 5 (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).