FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	

OMB APPRO	VAL							
OMB Number:	3235-0287							
Estimated average burden								
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*  RICE REX D					FA	2. Issuer Name and Ticker or Trading Symbol FARMERS & MERCHANTS BANCORP INC [FMAO]										Check al	I appl Direct	ip of Reporting Perso plicable) ctor eer (give title		10% C	wner
(Last) (First) (Middle) 710 PINE ST						3. Date of Earliest Transaction (Month/Day/Year) 08/20/2015											pelow			Other (specify below)  President	
(Street) WAUSE(			13567 Zip)		4. If	If Amendment, Date of Original Filed (Month/Day/Year)									ne) X	Form Form	or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)						Execution D			Co	Transaction Disposed Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,			nd S B O	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										de V		Amount	(A) or (D) Pri		Price	,  т	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
COMMON STOCK 08/20/						/2015		A	<b>A</b>		600 A		A	\$0.	00	7,353			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			Date, y/Year)	4. Transa Code ( 8)				Expira (Mont	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of Shares		ount nber	nt er				vnership rm: ect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

Remarks:

Lydia Huber

08/20/2015

\*\* 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.