

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, DC 20549**

OMB APPROVAL
OMB Number: 3235-0287
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[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person* Hay Karl S	2. Issuer Name and Ticker or Trading Symbol Myers Industries, Inc (MYE)	6. Relationship of Reporting Person(s) to Issuer (Check all applicable) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width:75%;">Director</td> <td style="width:10%;"></td> <td style="width:10%;">10% Owner</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Officer (give title below)</td> <td></td> <td>Other (specify below)</td> </tr> <tr> <td colspan="4"> </td> </tr> </table>	<input checked="" type="checkbox"/>	Director		10% Owner	<input type="checkbox"/>	Officer (give title below)		Other (specify below)				
<input checked="" type="checkbox"/>	Director		10% Owner											
<input type="checkbox"/>	Officer (give title below)		Other (specify below)											

(Last) (First) (Middle) 93 East Fairlawn Blvd	3. I.R.S. Identification Number of Reporting Person, if an entity (Voluntary)	4. Statement for Month/Day/Year 10/31/02	7. Individual or Joint/Group Filing (Check Applicable Line) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%;"></td> <td style="width:95%;">Form filed by One Reporting Person</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Form filed by More than One Reporting Person</td> </tr> </table>		Form filed by One Reporting Person	<input type="checkbox"/>	Form filed by More than One Reporting Person
	Form filed by One Reporting Person						
<input type="checkbox"/>	Form filed by More than One Reporting Person						
(Street) Akron OH 44313							
(City) (State) (Zip)							

Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr.8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	10/31/02		G	V	1,125	D		12,994	D	

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).

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 control number.

(Over)
SEC 1474 (9-02)

