FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

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*						2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
OCONNOR JAMES E						ıı C	DLIC	JET	X V I	ICEO	, 11	<u>vc.</u> [K.	ן טכ		Ι,	X	Direc	ctor		10% O	wner
(Last) (First) (Middle)					3 D	Date of Earliest Transaction (Month/Day/Year)										X	Office belov	er (give title v)		Other (below)	(specify
110 S.E. 6TH STREET						12/09/2008												Chairmai	n and	CEO	
28TH FLOOR																					
(Street) FORT LAUDERDALE FL 33301					4. If Amendment, Date of Original Filed (Month/Day/Year) 12/11/2008											Indivi ne) X	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(City) (State) (Zip)																Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution			ָן '				ities Acquired (A) d Of (D) (Instr. 3,			l and Securi Benefi		cially I Following	Form:	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									(Code	v	Amount		(A) or (D)	Price	. 1	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock																	1,515.608(1)			Ι	By 401(k) Plan
	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)	2. 3. Transaction Or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			Date,	Code (Insti				Exp	6. Date Exercisable Expiration Date (Month/Day/Year)			nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Pri Deriv Secu (Insti	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Or Fo Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	te ercisabl		expiration pate	Title	or Nui of	ount mber ires						

Explanation of Responses:

1. Total reflects dividends paid under the Company's 401(k) Plan since the last report filed. The number of shares held by the reporting person's 401(k) plan were incorrectly reported on the reporting person's original Form 4.

/s/ Jo Lynn White, Attorney-In-01/21/2009

Fact

** Signature of Reporting Person

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.