FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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STATEMENT	OF CHAN	IGES IN BEN	VEFICIAL O	WNERSHIP

	OMB APPRO	OVAL
	OMB Number:	3235-0287
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1	hours por rosponso:	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*				2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CASCADE INVESTMENT LLC					<u>JLIC</u>	<u> </u>	101	<u> </u>	<u> 1110.</u> [100	, ,			Dire	ctor	X 10% C	Owner
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)										Other below	(specify)	
OINT																
			4. 1	f Amen	dment	Date	of Origin	nal Fi	led (Month/Da	ıy/Year)			idual c	or Joint/Group	Filing (Check A	Applicable
70 (ายบรร											Line)	Forn	n filed by One	Reporting Pers	son
A 3	70033											X			than One Rep	orting
tate) (Zip)										reis	SULL				
Tabl	le I - I	Non-Deriv	ative	e Sec	uritie	s A	cquire	d, D	isposed o	f, or E	Benefic	ially	Own	ed		
Date		Date		Execution Date,		r, Transaction Disposed Of (D) (Ins					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)	Price	Transact		action(s)		(Instr. 4)	
Common Stock 06/23/2014			14				P		350,000	A	\$37.35	557 ⁽¹⁾	91	,862,512	D	
Ta	able II												vned			,
Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) Derivative Security Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) Security Execution Date, if any (Month/Day/Year) Security Of Disprice of (Disprice) (A) or Disprice of (Disprice) (Instring in the image)		ative rities ired osed	Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Security (Instr. and 4)			nt of ties ying tive	Derivative Security (Instr. 5) Benefic Owned Follow Report Transa		derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)					
			Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amount or Number of Shares					
7 - 31	Tablestr. 3)	Table I 3. Transaction Date (Month/Day/Year) IA 98033 Table I - I 3A. De Execution and it is any if any	Table I - Non-Derivate (Month/Day/Non-Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (if any)	(Middle) POINT 7A 98033 State) (Zip) Table I - Non-Derivative (Month/Day/Year) 06/23/2014 Table II - Derivative S (e.g., puts, of the conduct of the c	(Middle) 06/23/20 POINT A 98033 State) (Zip) Table I - Non-Derivative Secutir. 3) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 06/23/2014 Table II - Derivative Secur (e.g., puts, calls, Transaction Date (Month/Day/Year) if any (Month/Day/Year) 3. Transaction Date (Month/Day/Year) if any (Month/Day/Year) Table II - Derivative Secur (e.g., puts, calls, Transaction Code (Instr.	Table I - Non-Derivative Securities (Month/Day/Year) Table II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) 3. 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1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u>								
(Last)	(First)	(Middle)						
2365 CARILLON POINT								
(Street) KIRKLAND	WA	98033						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* GATES WILLIAM H III								
(Last) ONE MICROSO	(First)	(Middle)						
(Street) REDMOND	WA	98052						
(City)	(State)	(Zip)						

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$37.2400 to \$37.5600. The price set forth above reflects the weighted-average price per share. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.

/s/ Cascade Investment, L.L.C. by Alan Heuberger as attorney-06/25/2014 in-fact for Michael Larson,

Business Manager

/s/ William H. Gates III by

06/25/2014

Alan Heuberger, Attorney-in-

<u>fact</u>

** 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.