## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burd	en				
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	1 30(n)	or tne	investm	nent C	ompany Act	of 1940							
					2. Issuer Name <b>and</b> Ticker or Trading Symbol REPUBLIC SERVICES, INC. [ RSG ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
CHOCK		ESTIVIENT L	<u>LC</u>									Dire	ctor	2	X 10% C	)wner			
(Last) 2365 CA	(Fir	,	Middle)			Date of Earliest Transaction (Month/Day/Year) 9/10/2014						Offic belov	er (give title w)		Other below)	(specify			
(Street)  KIRKLA  (City)			18033 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line)	Form filed by One Reporting Person						
		Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Owne	ed			
Date			2. Transact Date (Month/Day		Execution Date,					curities Acquired (A) or osed Of (D) (Instr. 3, 4 a			Secur Benef	icially d Following	Fori	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Price	Trai		nsaction(s) tr. 3 and 4)			(111501.4)		
Common Stock 09/10/2014			014				P		15,134	A	\$39.	141(1)	102,496,774			D			
		Та	ble II								osed of, convertib				wned				
1. Title of Derivative Security  (Instr. 3)  2.			of Deriv Secu Acqu (A) or Dispo of (D) (Instr	Derivative (Month/Day Securities Acquired (A) or Disposed		tion D	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
		Reporting Person*  ESTMENT L	LC																

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)	(First)	(Middle)						
ONE MICROSO								
(Street)								
REDMOND	WA	98052						
(City)	(State)	(Zip)						

## **Explanation of Responses:**

1. This transaction was executed in multiple trades at prices ranging from \$39.1125 to \$39.1500. 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 attorneyin-fact for Michael Larson,

**Business Manager** 

/s/ William H. Gates III by

09/12/2014

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.