## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	Washingt	on, D.C. 20549	
<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPR	JAVC				
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

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1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol REPUBLIC SERVICES INC [ RSG ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 08/11/2008									Director Officer (give title below)			Other (below)	(specify	
(Street) KIRKLAND WA 98033 (City) (State) (Zip)			- 4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  X Form filed by More than One Reporting Person								
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/	Execut (Year) if any		ution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefic Owned		rities ficially ed Following	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 08/11/2008		08	8			P		1,350,000	A	\$34.8	905(1)	30,714,249			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O F D O (!	0. ownership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares	1					
1. Name an	d Address of	Reporting Person*																	

1. Name and Address of CASCADE INV	f Reporting Person*  VESTMENT LLC	2				
(Last)	(First)	(Middle)				
2365 CARILLON F						
(Street)						
KIRKLAND	WA	98033				
(City)	(State)	(Zip)				
1. Name and Address of Reporting Person*  GATES WILLIAM H III						
(Last)	(First)	(Middle)				
ONE MICROSOFT	WAY					
(Street)						
REDMOND	WA	98052				
(City)	(State)	(Zip)				

## **Explanation of Responses:**

1. This transaction was executed in multiple trades at prices ranging from \$34.57 to \$35.18. The price reported above reflects the weighted average purchase price. The reporting persons hereby undertake 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.

\* Duly authorized under Special Power of Attorney appointing Michael Larson attorney-in-fact, dated February 3, 2006, by and on behalf of William H. Gates III, filed as Exhibit 99.1 to Cascade Investment, L.L.C.'s Amendment No. 2 to Schedule 13G with respect to Arch Capital Group Ltd. on March 7, 2006, SEC File No. 005-45257, and incorporated by reference herein.

> Cascade Investment, L.L.C. By: /s/ Michael Larson, Business Manager

08/13/2008

William H. Gates III By: /s/ 08/13/2008

Michael Larson\*, Attorney-InFact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.