



INDIANA ECONOMIC IMPACT - PROPOSALS AND CONTRACTS
 State Form 51778 (R4 / 1-09)
 DEPARTMENT OF ADMINISTRATION
 Approved by State Board of Accounts, 2006

This information is required by the Indiana Department of Administration for all contractors, vendors/suppliers to the State of Indiana (complete all 22 items).

1	Legal Name of firm:	Republic Services of Indiana, LP	
2	Address/City/State/Zip Code:	12820 S Cumminsville St, Pimento IN 47866	
3	Telephone #/Fax #/Website:	812-298-2100/812-298-2198/www.republicservices.com	
4	Federal Tax Identification Number:	65-1012411	
5	State/Country of domicile/incorporation:	Delaware, USA	
6	Location of firm's headquarters or principal place of business:	Phoenix, AZ	
7	Name of parent company or holding company (if applicable):	Republic Services Inc	
8	State/Country of domicile/incorporation of company listed in #7:	Delaware, USA	
9	Address of company listed in #7:	18500 North Allied Way Phoenix, AZ 85054-6164	
10	IN Department of Workforce Development (DWD) account number:	472711 (ADM) 50463 (TRANS)	
11	IN Department of Revenue (DOR) account number:	0108502643 (ADM) 011412416700 (TRANS)	
12	Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:		2,460
13	Total number of employees per most recently completed IRS Form W-2 distribution:		36,000
14	Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:		\$80,124,716
15	Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:		\$5,624,272,046
16	Total amount of this proposal, bid, or current contract:		\$433,440.00

ACCOUNTING OF INDIANA RESIDENT EMPLOYEES

17	Prime Contractor Company Name:	Republic Services of Indiana, LP
18	Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:	0.21

	Subcontractor Company Name:	(Enter Company Name Here)					
20(A)	Address:						
20(B)	Contact Person:						
20(C)	Telephone Number:						
20(D)	Tax ID Number:						
21	Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:	0.00	0.00	0.00	0.00	0.00	0.00

22	Affirmation by authorized official: I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief:	
	Signature:	
	Name of authorized official:	Ben Pearson
	Title:	General Manager
	Date:	10/1/2020

