



Arrest Report

OKALOOSA COUNTY SHERIFFS OFFICE
50 SECOND STREET
SHALIMAR, FL 32579

Report Date / Time 5/11/2024 09:22 PM	Report Number OCSO24ARR004140	Case Number/Cad Number OCSO24OFF006357 / OCSO24CAD089198	Reporting Officer Name BALL, CHRISTOPHER
Originating Agency ORI FL0460000	Occur Date Time Range 05/11/2024 18:27:29 -	Jurisdiction In Jurisdiction	
OBTS Number 4601141977	Other Number	Clearance	

Location of Occurrence

County OKALOOSA	Location Type	Location Description			
Street Number 4570	Street HWY 20 E	Apt/Lot/Bldg	City NICEVILLE	State FL	Zip Code 32578

Suspect

First Name TARA	Middle Name MARIE	Last Name BAGGETT	Suffix	Race WHITE	Sex FEMALE	Height 5'01"	Weight 150	Hair BLK	Eyes GRN
MNI # OCSO24MNI008675	SSN	Date of Birth 03/04/1986	Age 38	ID Type	Drivers License or other ID	State	OCA / Agency ID 262805		
Place of Birth:	UNITED STATES								
Address									

Arrest Report Data

Question Domestic Violence	Answer No
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Arrest

Arrest Date/Time 5/11/2024 7:48:00 PM	Arrest Location Type BUSINESS	Arrest Location Description				
Street Number 4570	Street HWY 20 E	Apt/Lot/Bldg	County OKALOOSA	City NICEVILLE	State FL	Zip Code 32578

Charge : S

Counts 1	Charge 893.147.1	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree F	Charge Level MISDEMEANOR		
General Offense Code COMPLETED	Arrest Offense Code 3550		
Charge Description AND OR USE			
Administrative Code - Description -			

Probable Cause

On May 11, 2024, the DEFENDANT, Tara Marie Baggett, violated Florida State Statute F.S.S 893.147

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POSSESSION OF DRUG PARAPHERNALIA AND OR USE. This incident occurred at McDonald's, 4570 HWY 20 E Niceville, FL, 32578, during a trespass investigation.

Upon arrival, your AFFIANT observed a blue Dodge sedan bearing Florida Registration, BT06YR, as described by the complainant in the rear part of the parking lot, with the rear passenger door ajar.

Your AFFIANT observed DEFENDANT in the rear passenger side seat asleep. DEFENDANT was awakened after your AFFIANT removed the CO-DEFENDANT from the vehicle due to suspected narcotics and paraphernalia being located in plain view. Based on my training and experience, your AFFIANT recognized the aforementioned items as commonly used equipment associated with narcotics users.

DEFENDANT was searched by D/S Grundin and found to have paraphernalia (a cut straw) concealed within the bra.

Your AFFIANT was assisted by D/S Grundin who field tested residue from within the cut straw that was removed from DEFENDANT'S person and it yielded a presumptive positive for Fentanyl.

Post Miranda, the DEFENDANT invoked their rights.

Based upon your AFFIANT'S investigation, there is probable cause to believe that the DEFENDANT, Tara Marie Baggett, violated the aforementioned Florida State Statute. This offense is contrary to law, as such case provided, and against the peace and dignity of the State of Florida.

Jail Booking Facility

Booking Date/Time 5/11/2024 08:50 PM	Booking County OKALOOSA	Booking Facility OCSO BOOKING	Booking Facility Phone 850-651-7430
Booking Facility Location 1940 LEWIS TURNER BLVD. FORT WALTON BEACH, FLORIDA 32547			Booking Number
Booking Comments			

Court

Court County OKALOOSA	Court Location OKALOOSA COUNTY COURTHOUSE ANNEX EXTENSION 1940 LEWIS TURNER BLVD, FORT WALTON BEACH FL 32547		
Court MISDEMEANOR - SOUTH	Court Phone	Court Appearance Date / Time 05/28/2024 1330	Court Fine
Comments COURTHOUSE ANNEX EXTENSION			

Officer Name
Rank / ID #

Involvement On Report /
Reporting Role

Officer Agency
Org/Unit

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BALL, CHRISTOPHER DEPUTY 2053	REPORTING OFFICER	OKALOOSA COUNTY SHERIFFS OFFICE OCSO/
SAVOIE, COLIN SERGEANT 1630	APPROVING SUPERVISOR	OKALOOSA COUNTY SHERIFF'S OFFICE OCSO/FSV/NORTH/AC/A-SHIFT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name BALL, CHRISTOPHER	Office Rank DEPUTY	Officer ID No 2053	Sworn and subscribed before me, the undersigned authority This the _____ day of _____, _____
Officer Agency OKALOOSA COUNTY SHERIFFS OFFICE	DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT		
Officer Signature			

<input type="radio"/> No Bill / Petition <input type="radio"/> Issue Warrant <input type="radio"/> Prosecution Approved	_____	_____
	Signature of Assistant State Attorney	Date